



USAID
FROM THE AMERICAN PEOPLE



Volunteer Name:
State of Origin:
Occupation:
Assignment Title:
SOW NO:
Host Organization:
Assignment Dates:
Presentation Date:





1. Host Organization Problem Statement



2. Assignment Objectives as in SOW



3. Achievement of the assignment objectives

4. Action plan for adoption of Volunteer recommendations

| Recommendation | Specific Action | Responsible person | By when |
|----------------|-----------------|--------------------|---------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| 6. | | | |

5. Anticipated Impact



6. Recommended future volunteer Assistance

7. Recommendations to CRS or other non-host stakeholders

Thank You!