Begin Report

To begin the final report, please acknowledge the terms and conditions below and click Save or Proceed.

Terms of Use for Report Materials

The National Library of Medicine and ALA Public Programs Office retains the right to use submitted final report materials (i.e., program descriptions, comments, photographs, publicity materials, etc.) for project promotion, evaluation and other purposes. Personal identification information will not be used without prior consent.

☐ I acknowledge and agree to the terms above.

Save Use this button to save your work at any time.

Proceed Use this button to save your work and move on to the next page.

Attendance and Audiences

Please note: You are required to provide at least an estimate of how many people spent some time with one or more components of the exhibit. Please do not provide only the number of visitors who signed a guestbook.

Total number of visitors to the host site during exhibition period

Is this number actual or estimated?

☐ Actual

☐ Estimated

Source of statistics

Total number of visitors to exhibit

Is this number actual or estimated?

☐ Actual

☐ Estimated

Source of statistics
# Programs

Please describe the individual programs you hosted with this exhibit (include title, format, presenter for all programs; describe the program, presenters, present qualifications and/or role in project in descriptive field)

## First Required Program

<table>
<thead>
<tr>
<th>Title</th>
<th>Program Type</th>
<th>Program Date</th>
<th>Attendance</th>
<th>Presenter Information</th>
<th>Location</th>
<th>Program Description</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Discussion</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Second Required Program

<table>
<thead>
<tr>
<th>Title</th>
<th>Program Type</th>
<th>Program Date</th>
<th>Attendance</th>
<th>Presenter Information</th>
<th>Location</th>
<th>Program Description</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Exhibition</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Additional Programs

Please complete and/or revise the table below to tell us about your additional programs. For each additional program you listed in your Pre-Exhibit form, the Title and Description will appear below. Please provide the additional requested information for those programs.

Please confirm your plans for each public program listed in your proposal. Format dates as mm/dd/yyyy.

<table>
<thead>
<tr>
<th>Title</th>
<th>Program Type</th>
<th>Program Date</th>
<th>Attendance</th>
<th>Presenter Information</th>
<th>Location</th>
<th>Program Description</th>
<th>Delete?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Please Select</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

To add a program, select this checkbox, and click “Add/Save.” Any changes you have made above will be saved, and a new program will be created.
Narratives

The following questions should be answered in narrative format (600 words or less). Note: All fields are required unless otherwise noted.

Organizational Goals

Why did you want to host the Native Voices exhibition? Did you achieve your organization’s goals? If not, what barriers did you encounter?

Community Interaction and Understanding

What was most valuable for your attendees and program participants? Did the exhibit and/or your programs enhance community understanding of how Native people’s concepts of health and illness are interconnected with cultural life? Please describe why or why not.
Community Partners

Please list your community partners and their roles during the planning and implementation of this program series. How were their goals, mission or interests advanced by this project? Was this a new partnership? How likely is it that you will work with your community partner(s) in the future?

How many community partners did you work with while hosting the Native Voices exhibit?

Total partners

Promotion

How did you recruit exhibition attendees and program participants and otherwise promote Native Voices? Examples of promotional materials and media coverage may be uploaded at the end of this report.

Resources

What materials from the online Site Support Notebook or resources did you utilize? Please check all that apply.

☐ NLM Native Voices website
☐ Sample evaluation forms
☐ Downloadable promotional materials (e.g., web banners, postcards)
☐ Template PR materials (e.g., press releases, PSAs, social media posts)
☐ Native Voices Resources (e.g., suggested readings list, related websites, programming idea list)
☐ Flash drive of Native Voices interviews
☐ Exhibit installation instruction videos
☐ Exhibit orientation webinar recording
☐ Project discussion list (nativevoices@lists.ala.org)
☐ Personal project staff support (ALA staff, NLM staff)
☐ Other (Please describe)
Programming Outcomes and Impact

How did you evaluate your programs, and what did you learn? We appreciate any direct feedback from project staff, speakers, partners and the public; you may upload supporting information or examples. If your evaluations were completed electronically, please list a link to results or upload the relevant data file at the end of this report.

Areas for Improvement

Please tell us about any challenges you faced while implementing the Native Voices exhibit and programs. What would have improved your experience?

Additional Information (optional)

If there is anything else you would like to tell us about your experience hosting the Native Voices exhibit, please use the space below.
Budget

Grant Budget

The programming grant of $250 from the National Library of Medicine may be used for expenses related to local exhibition programming (indirect costs may not be charged to the grant by host sites). Please note that grant funds may not be used to pay for social events, receptions, entertainment or alcoholic beverages.

Please provide a brief report of how your library used the grant. Rows must total $250.

No items listed. To begin, create an entry using the fields below:

Item

Amount

Type  
Please Select

Description

Add Item

Optional Matching Support (cash and in-kind)

If you received in-kind or matching donations from another source, please include that information here. You will be prompted to enter both the dollar amount and a brief, one-sentence description of the source.

No items listed. To begin, create an entry using the fields below:

Amount

Source

Type of Support  
Please Select

Description/Purpose

Add item

Supporting Documents

The following may be provided via file upload:

- Promotional materials
- Media coverage
- Event photos
- Completed evaluations or evaluation results

Upload

Permitted file types: pdf, doc, docx, rtf, xls, xlsx, csv, jpg, jpeg, png, gif, tif, tiff, png, zip

To upload a file, click "Choose File." After you have selected a file, click "Upload" to attach it. Maximum file size is 10 megabytes.

File

Choose File  No file chosen

Upload