Universal Cover Sheet for All Scan Forms

Please complete all fields in the first two sections and use uppercase print to write letters (i.e., ABC). Thank you!

Extension Faculty

First Name:

Last Name:

Lead County or Unit Number:

Look up your 3-digit county or unit code here.
CEP Headquarters use 517

Are you part of the CEP (1890) Program? ○ Yes ○ No

if a multi-county event, please include the other counties codes here:

About the Activity

Title of the Activity:

Date of Activity: / /

Evaluation Resources: https://tx.ag/ExtensionEvaluation

Scan Forms: https://tx.ag/ScanForms

Type of Plan:
- ○ In-depth
- ○ Outreach
- ○ Organizational support

CEUs Offered:
- ○ Pesticide
- ○ Other
- ○ CEUs not offered

Was this a Partial Cost Recovery (PCR) Activity?
- ○ Yes
- ○ No

Zip Code Where the Activity Occurred:

How many individuals attended this event?

(Please enter an exact number even if you can only provide a best estimate)

Type of activity:
- ○ Field Day / Tour
- ○ Demonstration
- ○ Group educational event
- ○ Workshop
- ○ Other

State Goal:
- ○ Goal 1 (Educate Texans for Improving Their Health, Safety, and Well-Being)
- ○ Goal 2 (Agriculture, Natural Resources, Economic and Environmental Education)
- ○ Goal 3 (Foster Development of Responsible, Productive & Motivated Youth/Adults)

Specialists to receive results (list more on back if needed):

Is economic benefit for the participant one of the explicit goals of the program?
○ Yes ○ No

Office Use Only

Batch number:

Form number: (Use 999 for online)

MAIL FORMS AND THIS COVER SHEET TO:

Paul Pope
Texas A&M AgriLife Extension Service
1470 William D. Fitch Parkway
College Station, TX 77845

For TAMU Campus Mail: MS 2146

3697362400