



Description of Tool	<i>This tool is to be used by nutrition group facilitators, CLCs or ASCs that conduct nutrition training to beneficiaries. Each training conducted during one month should be recorded. This form is completed on a monthly basis and is submitted to the Nutrition Coordinator on the 5th of each following month.</i>			
Month of Data Collection	_ _ _2_ _ _ _ Month Year	District (Use Code)	1. District A 2. District B 3. District C	_
Name of Facilitator				

A. Nutrition Message Dissemination to Households				
Output 3.5.1, Indicator 4 (# of households that have received nutrition messaging each year)				
Date of Visit (dd-mm-yy-)	Village Name	Key Message Disseminated	# of Male Headed Households Visited	# of Female Headed Households Visited

If additional rows are needed in Table A or B to record monthly trainings, please staple an extra sheet of paper to this form and follow the same format as Table A and B.

B. Nutrition Message Dissemination to Schools					
Output 2.5.1, Indicator 5 # of boys and girls provided nutrition messaging through school presentations					
(Instructions: Use 1 line for each school presentation)					
Date of School Visit (dd-mm-yy)	Village Name	School Name	School Level 1. Level 1 – 3 2. Level 4 – 6 3. Level 7 - 9	# of Boys in Attendance	# of Girls in Attendance

Date Verified	_ _ _ _ _2_ _0_ _ _ Day Month Year	Verifier Signature	
Data Entered Into Database	_ _ _ _ _2_ _0_ _ _ Day Month Year	Data Entry Signature	