|  |  |
| --- | --- |
|  |  Local Food Alliances Best Practices Convening |

|  |  |
| --- | --- |
| Name |  |
| Organization |  |
| Address |  |
| City, State, ZIP |  |
| Email |  |

Do you currently participate in a local food alliance? Yes [ ]  No [ ]

|  |  |
| --- | --- |
| If yes, which one? |  |

**Optional:**

In order to gather more information about local food alliances, we would appreciate you taking the time to complete the following information.

**Which stakeholders participate in your local food alliance?**

[ ]  Food banks/pantries [ ]  Healthcare

[ ]  Human services agencies [ ]  Local or County governments

[ ]  Education [ ]  Agriculture industry

[ ]  Business [ ]  Law enforcement

[ ]  WIC [ ]  SNAP outreach partners

[ ]  Child care/Early-childhood educators [ ]  SNAP education partners

[ ]  Faith-based organizations [ ]  County Extension offices

Other:

|  |
| --- |
|  |

**Which are the specific programs or areas of focus for your local food alliance?**

[ ]  SNAP [ ]  Senior hunger

[ ]  WIC [ ]  Healthy food access

[ ]  School lunch/breakfast [ ]  Farm to School

[ ]  Summer feeding [ ]  Community gardens

[ ]  Child care feeding [ ]  Economic development/reinvestment

[ ]  After-school feeding [ ]  Nutrition education

[ ]  Emergency food assistance [ ]  Farmers markets

Other:

|  |
| --- |
|  |

**What are some of the biggest successes of your local food alliance?**

|  |
| --- |
|  |

**What have been some of your local food alliances biggest challenges?**

|  |
| --- |
|  |

**What are the goals/priorities of your local food alliance over the next year?**

|  |
| --- |
|  |

**What barriers exist in meeting these goals?**

|  |
| --- |
|  |

**Other Input/Comments/Suggestions?**

|  |
| --- |
|  |