# Registration form: Impact assessment workshop

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| *Please submit this registration form within* ***20 October*** *to Viola Asri (Development Learning Lab/CMI) at* [*viola.asri@cmi.no*](mailto:viola.asri@cmi.no)*.*  *For questions or advice, please contact Viola Asri (Development Learning Lab/CMI) at* [*viola.asri@cmi.no*](mailto:viola.asri@cmi.no) *or +47 413 48 926.* |

**Organisation**

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| Organisation |  |
| Contact person |  |
| Contact person’s email address |  |

**Description of the intervention**

*Briefly describe the intervention (programme/project/policy) to be evaluated.*

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**Objective(s)**

*List the objective(s) of the intervention.*

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**Target group**

*List the target group.*

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**Geographical coverage**

*Indicate the countries and regions in which the intervention will operate.*

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**Timeline**

*Outline the timeline for the intervention. When will it start or did it start?*

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**Planned evaluation methods (optional)**

*If already planned: Which evaluation methods were you planning to use?*

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