

Appendix B

Program Narrative

Department of Workforce Services (DWS)

Refugee Capacity-Building Organizations (RCBO) 2024-2026

(Be sure to provide a detailed description of each program the organization will be providing)

Organization:

Level:

Level I

Level II

Level III

How many programs will the organization provide:

1

2

3

Program Services - Please select the service(s) that will be provided under this grant

Check the box(es) that apply for the proposed program(s):

Which service(s) will the organization provide:

Programs:

- English Language Learning
- Employment Training and Referrals
- Youth Development
- Computer and Technology Training
- Social Services
- Life Skills (*examples: Driver's License Training, Parenting, Nutrition*)

Additional Services

(If any)

- Recreational Activities (*Sports, Dance, Yoga*)
- Home Visits
- Cultural Preservation
- Board Development
- Cultural and/or Community Events
- Community Organizing and Engagement

Answer the following questions about the program(s) the organizations will provide.

Directions: Narrative must be in the default size, font, and spacing provided. Additional narrative attachments are not allowed.

COMMUNITY NEED

1. What is the need within the community? How does the organization know this is a need? How does this need impact families/individuals in the community? How many people are affected?

2. Are other organizations already addressing this need? If so, why is the organization's program necessary? If the organization has addressed this need in the past, why is the program still necessary?

Target Population

3. What is the target population? (e.g. *12-18 year olds in the Burundi community; Swahili-speaking single parents; senior refugees in South Salt Lake*). Be sure to state the country of origin of the target population.

4. How has the organization worked with this target population in the past? For how long?

5. How does the organization plan on recruiting the target population? How will the organization ensure the target population continually participates in the program(s)?

Program Description

6. Describe the program(s). Describe how the provided service(s) will address the need.

7. How will the service(s) be delivered (e.g. *workshops, one-on-one appointments, case management*)? How often will the service(s) be delivered?

8. What challenges might the organization face while implementing the program(s)? (e.g. *transportation, language, technology, childcare, recruitment*). How does the organization plan on overcoming each of these challenges?

9. What resources and partnerships does the organization plan to use to support this program? How will these resources and partnerships support this program?

PROGRAM COORDINATOR

List information for the person(s) in charge of running this program.

Service	Name	Phone Number	Email Address

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Goals and Outcomes

NOTE: Provide information for each program.

Describe the goals and outcomes for the program(s).

10. Program Goals and Outcomes

List the topics that the program(s) will cover.

(Examples: Mental Health, Family Budgeting, etc.)

What will the organization accomplish?

(Example: Reduce high school dropouts; encourage higher education)

Based off the program topics, what result(s) will indicate the organization has accomplished its goal(s)?

(Example:
1. 10 participants applied and approved for scholarships by July 2026.
2. 5 participants accepted to college by the end of the contract.
3. 60% of unemployed participants get a job with nine months.
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Total Number of Workshops		
Where will the workshops take place?		
Number of Participants per Workshop		

You have reached the end of this narrative.