



BEST PRACTICES FORM
(attach additional pages if needed)

Program Name/Summary: *Describe the project/program, including workforce boards and target population(s).*

Partnerships and Collaborations: *Describe the partnerships and collaborations developed in implementing this program. How does the project fit within local workforce and economic development needs?*

Project Funding: *How is the project funded? Have you leveraged resources to support the initiative?*

Program Results: *Discuss program results: economic impact, completion statistics, retention strategies, certifications and/or degrees earned, number of people placed in jobs, etc.*

Replication: *Describe how this program can be replicated in other locations as a model or concept?*

PROGRAM CONTACT: _____ **ORGANIZATION** _____

PHONE: _____ **EMAIL:** _____

Please return this from and any other program information to: Greg Vaughn; greg.vaughn@tawb.org; P.O. Box 703278; Dallas, TX 75370