



## Partnership Resource Teams Summary of Initial Visit Date of Visit:

Name of Institution: Partnership Resource Team Members:

Area of Focus	Institution's Point Person or Group, If Known	Heard during the Visit: Institutional Activities Underway	Heard during the Visit: Ideas Expressed by the Institution	Other IEPI Resources Needed?
A.		1. 2.	a. b.	•
В.		1. 2.	a. b.	•
C.		1. 2.	a. b.	•
D.		1. 2.	a. b.	•
Ε.		1. 2.	a. b.	•