

<b>National</b>	Olym	pic Co	mmittee
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IMPORTANT: This form must be duly completed and signed by the NOC and returned to Olympic Solidarity *in electronic format* at the latest two (2) months after the end of the project.

### **GENERAL INFORMATION**

Title of the seminar: Click here to enter	title
Start date: Select a date	End date: Select a date
Location: Click here to enter location	Scale (e.g. local, national, etc.): Click here to enter scale
DELIVERY AND OUTCOMES	
Please describe how your project was in	mplemented, its different steps and time frame:
To what extent have the project's expec	cted short-term outcomes been delivered?

when and now did you measure these outcome	es ?
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### **OUTREACH**

Please indicate in the table below how many people benefited from the project directly.

Please add rows as needed	Men	Women	Total
Sporting community			
School children / university students			
General public			
People with disabilities			
Socially vulnerable groups			
Other:			
TOTAL			



Please indicate how many people you estimate to have benefited from the project indirectly (optional): <i>Indirect Beneficiaries:</i> Indirect beneficiaries are people who benefit as a result of improvements made to the direct beneficiaries, e.g. because of knowledge transfer.					
Did your NOC or the media produce news about the project? If so, how many?	, articles or radio/	TV clips	0	Yes	O No
News on NOC website					
News in media					
TV clips					
Radio clips					
Other:					
Please attach a document with the links or pro	vide them below, if	available:			
PARTNERS  Was the project delivered in collaboration with other organisations?  C Yes  No					
If so, please specify which ones in the table be	low:			100	- 110
Organisation	How many? (e.g. 5 NFs)	Which ones? athletics fede		Role of organisa	
National Federations					
National Paralympic Committee					
National Olympic Academy					
International organisations					
Non-governmental organisations					
Governmental organisations					
Private sector, e.g. sponsors					
Other:					
TOTAL					
Did current or former athletes or your Athletes' Commission take an active role in the delivery of this project, e.g. as role models?  If so, what was their role in the project:  C Yes					



### **CONTENT**

If you organised an awareness campaign or an educational activity,
please indicate below what topics were covered:

You may choose more than one topic

History of the Olympic Games and Olympic Movement	
Olympism and the Olympic values	
Sport and Olympism in school	
Sport as a platform for value-based education	
Sport as a tool for social inclusion/cohesion	
Preservation of Olympic legacy	
Sport and culture	
Prevention of gender-based discrimination in sport	
Prevention of other forms of discrimination, e.g. based on social origin, ethnicity, religion, sexual orientation, language	
Prevention of bullying, harassment and abuse in sport	
Prevention of the use of alcohol and drugs	
Prevention of the use of doping	
Management of Olympic education programmes and events	
Role and action of NOCs, NOAs and NFs in this area	
Other: Please add rows as needed	

If you developed new content as part of this project, please indicate the topic(s) and form(s) of the new content in the field below. Please also attach or send links to the content. If you have produced a book or booklet, please send two copies by mail to Olympic Solidarity.

Topic	Book	Booklet	Арр	Video	Website	Other
If you have developed content, would you be willing to share this material with other NOCs?				O.	Yes	C No



### **NEXT STEPS**

What future actions do you intend to take to ensure that the project has long-term impact/outcomes?			
When and how do you intend to measure the long-term impact/outcomes of the pro	ject?		
OTHER			
Do you have other comments about this project that you wish to share with Olympic	Solidarity?		
ATTACHMENTS			
Links to news about the project developed by the NOC or media			
Copies of content developed as part of project. For books and booklets, please send two copies to Olympic Solidarity, C.P. 1374, 1001 Lausanne, Switzerland.			
Photos and/or videos			
Other documents – Please specify:			
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I, the undersigned, President/Secretary General of the above-mentioned NOC, certify that the information provided above is true and accurate.			
Name, function (President or Secretary General) and signature:  Date:			
Date.			