**PROGRAM INVENTORY FOR:**

| Cross Walk between RF Clearinghouse Terminology and AGA Terminology | |
|---|---|
| **Clearinghouse** | **AGA** |
| negative effects | lacking evidence of effectiveness |
| no effects OR lacking evaluation | lacking evidence of effectiveness |
| mixed effects OR promising | promising |
| second highest rated | research-based |
| highest rated | evidence-based |

*Please hover over the red triangles for additional information.*

| LINK TO RESULTS FIRST CLEARINGHOUSE |
|---|
| Evidence to Impact Results First Clearing House |

| Quick Guide to Program Inventories | |
|---|---|
| **Step 1** | Collect all programs currently implemented |
| **Step 2** | Determine cost and participant information for each program |
| **Step 3** | Determine whether the programs are evidence-based |
| For assistance with each of these steps, see instructions tab | |

| PROGRAM INFORMATION | | | | | | | | | [redacted] | | | COST INFORMATION FOR FY25 | | | | | | | | | | Outcome Information | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| **Program Name** | **Program Description** | **Average Duration and Length of Program** | **Age of Participants** | **Total Participants Served** | **Total Capacity** | **Number of Participants Eligible to complete program** | **Total Participants Completing the Program** | **Notes regarding program information** | **Program Matched to Evidence to Impact Clearinghouse?** | **Program Rating in R Clearinghouse (use drop-down to select; if not in clearinghouse select N/A). Use the RF program summaries to inform this match** | **Link to Research if not Using Results First Clearinghouse** | **Note regarding evidence base including any differences between NM program and program ided in the clearing house** | **Total Expenditures** | **Expenditures from State Funds (GF, OSF, etc)** | **Federal Fund Expenditure** | **Annual Cost per Participant** | **Annual Cost per Participant for Comparison Group (if applicable)** | **Description of Per-Participant Costs (e.g., how calculated)** | **Year of Costs if not FY25** | **FY26 budget** | **FY27 request** | **Notes regarding costs** | **Does agency collect any outcomes data from program?** | **If yes, what does the data show?** | **Did this program receive a GRO appropriation?** | **Notes re Outcomes** |
| EXAMPLE: Good Behavior Game | Public school classroom management approach | 1-2 hours a day for XX semesters | 7 | 1500 | 2000 | 1300 | 1300 | | Y | evidence-based | | | | | | | | | | | | | | | | |

lacking evidence of effectiveness

promising
research-based
evidence-based
N/A