

Naloxone Hero Project

Please fill this form out quarterly based on the due dates listed in your milestones. In Quarter 4, you will fill out this form twice--once with data from your 4th quarter, and once with data from the entire year. Please contact jspence@arorp.org with any questions or concerns.

Email *

rgentry@seviersheriffar.org

What is your organization's name? *

Sevier County Outreach

What date are you submitting your report on? *

MM DD YYYY

07 / 25 / 2023

Which quarterly report are you submitting? *

- 1st Quarterly Report
- 2nd Quarterly Report
- 3rd Quarterly Report
- 4th Quarterly Report
- Annual Report

How many trainings did your organization host this quarter? *

0

How many total individuals did you train this quarter? *

(If submitting your annual report, input the number of individuals trained this year.)

0

How many men did you train this quarter? *

(If submitting your annual report, input the number of individuals trained this year.)

0

How many women did you train this quarter? *

(If submitting your annual report, input the number of individuals trained this year.)

0

How many people did you train this quarter who do not identify as male or female (selecting "other" for gender)? *

(If submitting your annual report, input the number of individuals trained this year.)

0

How many African American people did you train this quarter? *

(If submitting your annual report, input the number of individuals trained this year.)

0

How many Caucasian people did you train this quarter? *

(If submitting your annual report, input the number of individuals trained this year.)

0

How many Hispanic people did you train this quarter? *

(If submitting your annual report, input the number of individuals trained this year.)

0

How many people did you train this quarter who marked "other" for their race/ethnicity? *

(If submitting your annual report, input the number of individuals trained this year.)

0

How many people aged 0-17 years did you train this quarter? *

(If submitting your annual report, input the number of individuals trained this year.)

0

How many people aged 18-25 years did you train this quarter? *

(If submitting your annual report, input the number of individuals trained this year.)

0

How many people aged 26-45 years did you train this quarter? *

(If submitting your annual report, input the number of individuals trained this year.)

0

How many people aged 46-64 years did you train this quarter? *

(If submitting your annual report, input the number of individuals trained this year.)

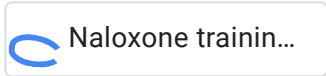
0

How many people aged 65+ years did you train this quarter? *

(If submitting your annual report, input the number of individuals trained this year.)

0

Please upload your data tracking sheet. *



(Optional) Please upload any photos you have of trainings.

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