

DELIVERABLES/ LIST OF ITEMS DUE PRIOR TO PROGRAM

Due ASAP:

- Your institution's logo and W9 form (**New Programs only**)
- Mailing address for checks and packages
- Organization that the checks will be made out to
- Main contact (First, Last name, Email address, Office #, Cell #, Address)
- Communities of Practice main contact (if different from main contact)
- Finalized Date of program
- Communications/Media Relations contact for your institution

Due 3 weeks prior to program :

- # of volunteers and tshirt sizes needed
- names and contact information of 10 individuals you would like stewarded
- list of organizations that you would like acknowledged on a "thank you" banner

Due 1 week prior to program:

- # Of women registered for the program
- Schedule for the day of the program (including when volunteers will begin arriving, any orientations/training done for volunteers)
- Any VIPs attending the program and any tours that will be conducted for these VIPs
- Any media interviews anticipated on the day of the program
- Names of lead radiologist, lead cytologist, lead provider, all pathologists attending program
- Main contact on the day of the program. Main contact will be responsible for:
 - o Introducing CAP Foundation representative to volunteers and giving tour of See, Test & Treat program to CAPF rep
 - o Setting up 2-3 patient and volunteer interviews for the CAPF rep in a quiet area (ideally) to make for a quality interview recording
- Parking information for the day of the program