Mine Risk Education/Victim Assistance IP Weekly Activity Report Form

Team ID: _____ **Implementing Agency:** _____

Code: AR1

Team No	Start Date	End Date	Location				Programe	Activity	Training Type	Audience	Number of Courses/ Sessions	Age Group	Youth		Adult		Materials Distributed		Data Collection
			Province	District	Village	Place							M	F	M	F	Type	Number	Form Type
	TOTAL:																		

Programe:
MRE
MRE/VA
VA

Place:
Healthcare Centre - HC
Encashment Centre - EC
Mosque - M
IDP Camp - IC
School - S
Village Centre - VC
Agency Office - AO
Other - O

Activity:
Community Based - C
Returnee/IDP - R
TOT - T
Exhibition - E
Other - O
Mobile Cinema-MC
Community Liaise-CL
Landmine Safety Programe-LSP

Training Type:
Direct Presentation - DP
Peer to Peer - PP
School Based - SB
Community Based - CB
Emergency Response - ER
Community Volunteer - CV
Other - O

Audience:
Health Worker - HW
Aid Worker/National - AWN
Aid Worker/International - AWI
School Teacher - ST
Returnee - R
Community Member - CM
Mine Action Personnel - MA
Student - S
Military - M
IDP - I
Government Official - GO
Religious Leader - RL
Women's Group - WG
Ex-Combatant - EXC
Disabled Persons Organization-DPO
Other - O

Age Group:
Youth
Adults

Materials type:
Brochure - B
Poster - P
Flyer - F
Booklet - BK
Film - FM
Radio/Cassette - R/C
Other - O

Data Form Type:
Victim Data - V
Munition - M
Incident - I
Suspected Area - S
Other - O