 **Mecklenburg County Partnership for Children** **FY 2023-24 Logic Model**

Activity: Activity Provider:

EC Profile ID:  PSC:

PIDs:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Need Statement **Why?**  | Target Population **Who?**  | Program or Activity Elements **What?**  | Outputs **How Many?**  | Outcomes **So What?** ***By June 30, 202X, …*** | How does outcome impact **EC Profile** or other long-term goal?  |
|  |  |  |  |  |  |
|  |  | (One activity or component per line/row!) |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

 **Staffing and Training Requirements:**

|  |  |  |
| --- | --- | --- |
| Job Title | FTE | Minimum Education & Experience Requirements |
|  |  |  |

**Other Requirements:**

**Community Collaborations:**