  **MODERATE RESOURCE PROGRAMS**

MRS routinely assesses programs and services to ensure alignment of volunteer efforts, staff time and resources with MRS’s Strategic Plan, MRS’s Core Values, member preferences and community needs. Details on MRS’s program assessment protocols can be found at <https://www.mrs.org/about-mrs/governance/program-assessment/>.

*This review form is for programs requiring marginal MRS resources (<$20k direct expenses and/or ><1.0 fulltime equivalent (FTE) of staff labor) or moderate MRS resources (between $20k and $80k direct expenses and/or between 1.0 and 1.5 fulltime equivalent (FTE) of staff labor)*

The first step in this process is for the project lead(s) for existing or proposed programs to submit the program review information detailed below to the MRS Headquarters Director for the program area.

**SECTION 1: PROGRAM REVIEW INFORMATION TO BE PREPARED BY PROGRAM LEAD**

***Program Relevance:*** *Please provide commentary and data on expected and/or realized outcomes:*

|  |  |
| --- | --- |
| Who is/will be the primary audience, and if applicable, secondary audience for this program? |  |
| How does/will the program advance MRS’s Strategic Aspiration to ***engage members across generations to advance their careers and promote materials research and innovation***? |  |
| Please provide details on competitive programs and how MRS is positioned to offer unique or superior performance. |  |

*Program* ***Effectiveness:*** *Please provide commentary and data on expected and/or realized effectiveness:*

|  |  |
| --- | --- |
| What are the program goals and, for existing programs, have they been achieved? |  |
| What challenges or problems have been encountered/are anticipated? |  |
| Does/will the program require new types of efforts by volunteers and staff? |  |

***Program Participation:*** *Please provide commentary and data on expected and/or realized engagement*

|  |  |
| --- | --- |
| Provide data (estimates for new programs) on number of members participating and engaged in the program |  |
| Provide data (estimates for new programs) on community/stakeholder participation, impact, and outcomes? |  |

***Please provide additional comments, data, etc. that you feel are relevant to the program assessment***

Submitted by:

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Signature | Title | Date |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Email address | Phone |  |

**SECTION 2: PROGRAM RESOURCE DETAILS TO BE COMPLETED BY HQ DIRECTORS**

|  |  |
| --- | --- |
| Is this program a generator of net income to the Society, a cost to the Society, or neutral? |  |
| What have been the direct expenses for this program for the past three years (input anticipated expense during program start-up and steady state operations for new program proposals)? |  |
| What have been the revenues for this program for the past three years (input anticipated revenue during program start-up and at steady state for new program proposals)? |  |
| What have been the staff hours/total labor/benefit cost for this program for the past three years (input anticipated hours for program start-up and steady state operations for new program proposals)? |  |
| What is the overall “net” financial return over the last three years? |  |
| Is the net return and staff hours projected to be more, same, or less in the coming years? |  |
| Can current staff execute (consider staff skills, time commitments, etc.) or will new staff be needed? |  |
| Is the current/projected volunteer pool adequate to guide and support the program? |  |

Reviewed by:

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Signature | Title | Date |