**MAKING PROUD CHOICES (MPC) SCHOOL EDITION CURRICULUM LOG SHEETS**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# **FOR FACILITATORS**

This packet contains 14 curriculum log sheets. Please complete the log sheet appropriate for each module you implement. These log sheets are a tool to document how much of the module you completed. If you wish to comment on any questions or explain your answers, feel free to write in the space in the margins.

FACILITATOR NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Instructions:** For each activity, indicate whether the activity was fully completed, partially completed, or not done at all. Place a check in the appropriate column.

Module 1 – Getting to Know You and Making Your Dreams Come True

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| **ACTIVITY** | **NOT DONE** | **PARTIALLY COMPLETED** | **FULLY COMPLETED** |
| A. Welcome and Program Overview |  |  |  |
| B. Talking Circle  |  |  |  |
| C. Creating Group Agreements  |  |  |  |
| D. *Making Proud Choices: Be Proud! Be Responsible!* Brainstorm |  |  |  |
| E. Goals and Dreams Timeline |  |  |  |
| F. Brainstorming Obstacles toYour Goals and Dreams |  |  |  |

Did you add anything that was not a part of this module as written in the manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what you added: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Did you make any other changes from the directions written in the facilitator’s manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what changed and why. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Instructions:** For each activity, indicate whether the activity was fully completed, partially completed, or not done at all. Place a check in the appropriate column.

Module 2 – The Consequences of Sex: HIV Infection: Part 1

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| **ACTIVITY** | **NOT DONE** | **PARTIALLY COMPLETED** | **FULLY COMPLETED** |
| A. *The Subject Is HIV* DVD and Discussion |  |  |  |
| B. Myths and Facts About HIV  |  |  |  |

Did you add anything that was not a part of this module as written in the manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what you added: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Did you make any other changes from the directions written in the facilitator’s manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what changed and why. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Instructions:** For each activity, indicate whether the activity was fully completed, partially completed, or not done at all. Place a check in the appropriate column.

Module 3 – The Consequences of Sex: HIV Infection: Part 2

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| **ACTIVITY** | **NOT DONE** |  **PARTIALLY COMPLETED** | **FULLY COMPLETED** |
| A. HIV Risk Continuum |  |  |  |
| B. Understanding Messages About Sex  |  |  |  |

Did you add anything that was not a part of this module as written in the manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what you added: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Did you make any other changes from the directions written in the facilitator’s manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what changed and why. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Instructions:** For each activity, indicate whether the activity was fully completed, partially completed, or not done at all. Place a check in the appropriate column.

Module 4 – Attitudes About Sex, HIV and Condom Use

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| **ACTIVITY** | **NOT DONE** | **PARTIALLY COMPLETED** | **FULLY COMPLETED** |
| A. *The Hard Way* DVD and Discussion |  |  |  |
| B. Calling Koko: Part 1 |  |  |  |

Did you add anything that was not a part of this module as written in the manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what you added: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Did you make any other changes from the directions written in the facilitator’s manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what changed and why. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Instructions:** For each activity, indicate whether the activity was fully completed, partially completed, or not done at all. Place a check in the appropriate column.

### Module 5 – Strategies for Preventing HIV Infection: Stop, Think and Act: Part 1

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| **ACTIVITY** | **NOT DONE** | **PARTIALLY COMPLETED** | **FULLY COMPLETED** |
| A. Calling Koko: Part 2 |  |  |  |
| B. STOP, THINK and ACT: Introduction to Problem Solving |  |  |  |
| C. Sean and Morgan Case Study: Problem Solving Using STOP, THINK and ACT |  |  |  |

Did you add anything that was not a part of this module as written in the manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what you added: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Did you make any other changes from the directions written in the facilitator’s manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what changed and why. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Instructions:** For each activity, indicate whether the activity was fully completed, partially completed, or not done at all. Place a check in the appropriate column.

Module 6 – Strategies for Preventing HIV Infection: Stop, Think and Act: Part 2

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| **ACTIVITY** | **NOT DONE** | **PARTIALLY COMPLETED** | **FULLY COMPLETED** |
| A. *Nicole's Choice* DVD and Discussion |  |  |  |
| B. The AIDS Basketball Game |  |  |  |

Did you add anything that was not a part of this module as written in the manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what you added: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Did you make any other changes from the directions written in the facilitator’s manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what changed and why. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Instructions:** For each activity, indicate whether the activity was fully completed, partially completed, or not done at all. Place a check in the appropriate column.

Module 7 – The Consequences of Sex: STDs: Part 1

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| **ACTIVITY** | **NOT DONE** | **PARTIALLY COMPLETED** | **FULLY COMPLETED** |
| A. STD Facts OR *The Subject Is STDs* DVD |  |  |  |
| B. The Transmission Game |  |  |  |

Did you add anything that was not a part of this module as written in the manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what you added: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Did you make any other changes from the directions written in the facilitator’s manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what changed and why. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Instructions:** For each activity, indicate whether the activity was fully completed, partially completed, or not done at all. Place a check in the appropriate column.

### Module 8 – The Consequences of Sex: STDs: Part 2

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| **ACTIVITY** | **NOT DONE** | **PARTIALLY COMPLETED** | **FULLY COMPLETED** |
| A. Discussing HIV and AIDS |  |  |  |
| B. What I Think About HIV/STD and Safer Sex |  |  |  |
| C. Condom Use Skills |  |  |  |

Did you add anything that was not a part of this module as written in the manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what you added: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Did you make any other changes from the directions written in the facilitator’s manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what changed and why. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 For each activity that you partially completed or did not complete, please indicate what was **not** completed and why: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Instructions:** For each activity, indicate whether the activity was fully completed, partially completed, or not done at all. Place a check in the appropriate column.

Module 9 – The Consequences of Sex: Pregnancy: Part 1

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| **ACTIVITY** | **NOT DONE** | **PARTIALLY COMPLETED** | **FULLY COMPLETED** |
| A. Brainstorming About Teens and Sex |  |  |  |
| B. Myths and Facts About Pregnancy |  |  |  |
| C. *Tanisha & Shay* DVD |  |  |  |

Did you add anything that was not a part of this module as written in the manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what you added: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Did you make any other changes from the directions written in the facilitator’s manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what changed and why. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 For each activity that you partially completed or did not complete, please indicate what was **not** completed and why: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Instructions:** For each activity, indicate whether the activity was fully completed, partially completed, or not done at all. Place a check in the appropriate column.

Module 10 – The Consequences of Sex: Pregnancy: Part 2

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| **ACTIVITY** | **NOT DONE** | **PARTIALLY COMPLETED** | **FULLY COMPLETED** |
| A. Birth Control Methods Demonstration |  |  |  |
| B. Agree/Disagree—Attitudes About Contraception |  |  |  |

Did you add anything that was not a part of this module as written in the manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what you added: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Did you make any other changes from the directions written in the facilitator’s manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what changed and why. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 For each activity that you partially completed or did not complete, please indicate what was **not** completed and why: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Instructions:** For each activity, indicate whether the activity was fully completed, partially completed, or not done at all. Place a check in the appropriate column.

Module 11 – Developing Condom Use and Negotiation Skills: Part 1

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| **ACTIVITY** | **NOT DONE** | **PARTIALLY COMPLETED** | **FULLY COMPLETED** |
| A. Condom Line-Up |  |  |  |
| B. How to Make Condoms Fun and Pleasurable |  |  |  |
| C. Barriers to Condom Use/ Condom Pros and Cons |  |  |  |

Did you add anything that was not a part of this module as written in the manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what you added: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Did you make any other changes from the directions written in the facilitator’s manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what changed and why. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 For each activity that you partially completed or did not complete, please indicate what was **not** completed and why: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Instructions:** For each activity, indicate whether the activity was fully completed, partially completed, or not done at all. Place a check in the appropriate column.

Module 12 – Developing Condom Use and Negotiation Skills: Part 2

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| **ACTIVITY** | **NOT DONE** | **PARTIALLY COMPLETED** | **FULLY COMPLETED** |
| A. “What to Say if My Partner Says...”: Responding to Excuses |  |  |  |
| B. Introduction to SWAT and Scripted Roleplays |  |  |  |

Did you add anything that was not a part of this module as written in the manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what you added: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Did you make any other changes from the directions written in the facilitator’s manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what changed and why. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 For each activity that you partially completed or did not complete, please indicate what was **not** completed and why: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Instructions:** For each activity, indicate whether the activity was fully completed, partially completed, or not done at all. Place a check in the appropriate column.

Module 13 – Enhancing Refusal and Negotiation Skills: Part 1

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| **ACTIVITY** | **NOT DONE** | **PARTIALLY COMPLETED** | **FULLY COMPLETED** |
| A. Safer Sex Negotiation Skills and *Wrap It Up* DVD |  |  |  |
| B. Practicing and Enhancing Negotiation Skills: Unscripted Roleplays: Part 1 |  |  |  |

Did you add anything that was not a part of this module as written in the manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what you added: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Did you make any other changes from the directions written in the facilitator’s manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what changed and why. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 For each activity that you partially completed or did not complete, please indicate what was **not** completed and why: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Instructions:** For each activity, indicate whether the activity was fully completed, partially completed, or not done at all. Place a check in the appropriate column.

Module 14 – Enhancing Refusal and Negotiation Skills: Part 2

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| **ACTIVITY** | **NOT DONE** | **PARTIALLY COMPLETED** | **FULLY COMPLETED** |
| A. Practicing and Enhancing Negotiation Skills: Unscripted Roleplays: Part 2 |  |  |  |
| B. Talking to Your Partner About Condom Use |  |  |  |
| C. Talking Circle |  |  |  |

 Did you add anything that was not a part of this module as written in the manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what you added: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Did you make any other changes from the directions written in the facilitator’s manual? \_\_\_\_\_\_Yes \_\_\_\_\_\_No

If yes, please describe what changed and why. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 For each activity that you partially completed or did not complete, please indicate what was **not** completed and why: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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