

MUTN COMMUNITY PROFILE

Date:

Name of Community:

Population:

% Disability/ %Seniors Population:

Main Economy:

<p>Contacts: Include names affiliation: (Attach contact info)</p> <p>MUTN NCMA Liaison:</p> <p>MUTN Community Liaison:</p> <p>MUTN Committee: yes/no attach</p> <p>MUTN Coordinator:</p>

<p>Community Description:</p>

<p>MUTN Committee Description: (composition, mandate, meeting frequency, etc)</p>

<p>Key Accessibility/Inclusion Issues facing the Community:</p> <ul style="list-style-type: none">• A• B• C• D• F• Other:

Community Evaluation: “How Does Your Community Measure Up? Short Checklist” (Initial Evaluation) Grade is 1-3 with “1” as highest.

<u>Element</u>	<u>Accessibility</u>	<u>Inclusiveness</u>
<u>Support Services</u>		
<u>Access to Information</u>		
<u>Economic Participation</u>		
<u>Community Contribution</u>		

MUTN Community Vision Statement:

Was a community resolution passed? (attach)

MUTN Goals:

Short Term

Med Term

Long Term

MUTN Projects/Policy Changes Working on:

Funding Sources: ie: Measuring Up? Other? Provide Name of grant and amount.

**MUTN Liaisons
Contact Information**

MUTN NCMA Liaison:

MUTN Community Liaison:

MUTN Coordinator: (not all communities have this person)

Measuring Up The North Committee

Name of Community:

Name

Affiliation

Contact Information