# Registration form: Impact evaluation incubator, 2–4 December 2024

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| *Please submit this registration form within* ***10 October*** *to Viola Asri (Development/Learning Lab/CMI) at* *viola.asri@cmi.no**.**For questions or advice, please contact Viola Asri at* *viola.asri@cmi.no* *or +47 413 48 926.*  |

**Organisation**

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| Organisation |  |
| Contact person |  |
| Contact person’s email address |  |

**Description of the intervention**

*Briefly describe the intervention (programme/project/policy) to be evaluated.*

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**Objectives(s)**

*List the objectives of the intervention.*

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**Target population and scope**

*List the target population. Indicate also the how many the intervention is expected to reach (e.g., number of households, farmers, firms, schools, or individuals).*

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**Geographical coverage**

*Indicate the countries and regions in which the intervention will operate.*

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**Comparison group**

*Will it be possible to identify a comparison group? Briefly describe.*

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**Timeline**

*Outline the timeline for the intervention. When will it start or did start? Any plan for future expansion?*

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