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| **Participant name or initials** |  |
| **Participant preferred pronouns** |  |
| **ARPA program name/type of program** |  |
| **Provide a participant story – see prompts below.** * *What barriers did the participant face, either before or during the pandemic?*
* *What was hardest to deal with?*
* *What services did the participant access?*
* *Were other organizations of assistance (in addition to ARPA funds)?*
* *How will the ARP assistance make a difference in the participant’s (personal and professional) life?*
* *Do you or the participant feel optimistic about the future? Why or why not?*
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| **Should other individuals, businesses or entities be tagged or mentioned if posted to social media? If yes, please list the social media handles.** |  |
| **Do you have a photo to include with this story?** |  |