

Date:

Reviewer:

Agency:

**ITCA WIC Program  
Part H: Local Agency Evaluation Summary Form**

Provide information about positive findings and areas which need improvement or change.

**Positive Findings:**

**Areas Needing Improvement:**

**Plan for Improvement:**

**What suggestions do you have for ITCA? Do you have any training needs or requests at this time?**

**Additional Comments (optional):**