



Voter Mobilization Resource Assessment

Name: _____ **Organization:** _____ **City:** _____ **State:** _____

Phone: _____ **Email:** _____

Resource Assessment Question	Resources On-Hand	Immediate Next Step to Take	Take Action Date
What staff already does or can incorporate voter mobilization activities into their work?			
What board members, volunteers, or clients could you recruit to participate in voter mobilization activities?			
What lists do you have access to (staff, volunteers, clients, donors, etc)? What information do they include (phone, email, address, legislative district)?			
What relationships or special connections do you have within communities of color/culture or specialized			

constituencies such as youth, LGBT, seniors, etc.?			
Resource Assessment Question	Resources On-Hand	Immediate Next Step to Take	Take Action Date
What types of voter mobilization activities are currently taking place in your community/state? How could you coordinate/enhance those efforts?			
What internal (staff, volunteer, client meetings/trainings, etc.) opportunities exist to mobilize voters? What external opportunities exist (HIV awareness days, health fairs, etc.)			
What technology resources do you have access to (website, Facebook, Twitter, email network, etc.)?			
Do you have capacity to provide rides to the polls through organization vehicles, volunteers, or partners?			
What financial resources can you put towards this effort?			

What other resources are needed to achieve your goals? _____

What type of support would you like see AIDS United provide to help you achieve your goals? _____