SUCCESS STORY TEMPLATE

Time to read: 5 minutes
Time to complete: ~1 hour

INTRODUCTION
Completion of the Success Story package is an integral part of the communications process. We look forward to your submissions and are grateful for your time and support!

1. WHAT CONSTITUTES A COMPLETE SUCCESS STORY PACKAGE?
As part of the Success Story package, please complete the following three (3) items.

1. Complete one (1) interview, which begins on Page 5. The interview should highlight one (1) beneficiary who has received services in the last year.
2. Take three to five (3-5) photos of the child that is interviewed.
3. Complete one (1) media release waiver for the beneficiary who is featured in the photos that you send to IMA. You can download a waiver on the IMA intranet or by contacting a member of the IMA External Relations Team at info@imaworldhealth.org. We have forms in various local languages, so please let us know which you require.

2. WHO IS INVOLVED IN THE SUCCESS STORY?
Please note that completion of the Success Story requires interviews with the following people:

- the beneficiary
- parent/community leader/educator
- field staff member.

3. WHY DOES IMA COLLECT SUCCESS STORIES?

- Success Stories will be considered for use in marketing, including but not limited to: blog posts, campaigns, social media, e-newsletters, etc.
- The Success Story and accompanying photos confirm to donors that services are reaching beneficiaries.
- Hearing from beneficiaries, parents/community leaders/educators, and field staff helps donors understand the impact and effect they have.

SUGGESTIONS & GUIDELINES

4. THE INTERVIEW

- Answers should be detailed and when possible, at minimum 3-4 sentences.
- Ask teachers, parents and/or community members for recommendations on children to profile.
- If talking to children, choose a child ages 6 to 16.
- Use a conversational tone in your answers.
5. PHOTOS

SENDING PHOTOS:
- Please send three to five (3-5) photos of the beneficiary that is interviewed.
- Upload the photos to a Google Drive folder and share it with the IMA External Relations Team, OR
- **Attach the photos in an email** to the IMA External Relations Team at info@imaworldhealth.org.
- Do not embed/insert the photos into this or any document.

WHAT TYPE OF PHOTOS SHOULD WE TAKE?
- File Type: .jpeg
- Resolution: 300 dpi (high resolution)
- Minimum width: 800 pixels
- Shape: Horizontal photos are preferred

IDEAL PHOTOS
- Great photos have one focus — one face or action.
- Outdoor photos with natural light are preferred.
- Photos should be taken at the child’s level or below.
- Check the scenery behind the child and what is featured in the background.
- Try to capture candid and natural moments.

THINGS TO AVOID
- Do not have the person in the photo make a sad or a serious face
- Do not photograph a child that is inappropriately exposed (i.e. naked or uncovered)

6. MEDIA RELEASE WAIVER

Complete one (1) Media Release waiver for the beneficiary.

FEATURED INTERVIEW

1. BACKGROUND INFORMATION

<table>
<thead>
<tr>
<th>Donor/Partner Name</th>
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<tbody>
<tr>
<td>Reporting Cycle</td>
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<tr>
<td>Date of Featured Interview</td>
</tr>
<tr>
<td>Beneficiary’s First and Last Name</td>
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<tr>
<td>Beneficiary’s Age</td>
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<tr>
<td>Beneficiary’s Gender</td>
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<tr>
<td>Is this the first time s/he has received these services?</td>
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<tr>
<td>If no, how many times has s/he received services?</td>
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<tr>
<td>Beneficiary’s nearest city</td>
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<tr>
<td>Short description of the community’s environment / terrain, local economy, and primary challenges</td>
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</tbody>
</table>
2. BENEFICIARY’S THOUGHTS ON SERVICES RECEIVED

Please use the beneficiary’s own words.

• Tell us about the service you received. Did you have access to this type of service before? If so, where was it available? How much did it cost?
• Tell me the story of the day you received these services.
• How do these services make a difference in your life?
• What is your favourite class in school (for children) or activity/hobby (for adults)?
• What do you want to be when you grow up (child)/where do you see yourself in 5 years (adult)?

3. PARENT/COMMUNITY LEADER/EDUCATOR (IF INTERVIEWING A CHILD)

• Name, position within the community (if applicable):
• What is the child’s personal story and family situation?
• What makes you proud of this child, and what do you hope this child will do in their future?
• How have you seen (or how will) the services provided help children/this child in your community?
• What is your hope or dream for the younger generation?

4. DONOR/PARTNER PERSPECTIVE

• Field staff name, position:
• What are the main interventions and support your organisation provides in the child’s community?
• How will the services provided enhance the programme and goals that your organisation is trying to accomplish in this community?
• How long has this community been receiving these services?
• How do the beneficiaries directly benefit from those programmes?
• Why are these services needed in this community? (Please be specific)
• What was your favourite part of providing these services?
• What inspires you to do this work?
• What do you wish people knew about your organisation and the people you serve?

5. PARENT/COMMUNITY LEADER/EDUCATOR (IF INTERVIEWING A CHILD)

• Are there any additional anecdotal stories you’d like to share with us, about this beneficiary or any others?

Before submitting: Did you remember to take three to five (3-5) photos of the beneficiary? Did you complete a separate Media Release waiver for each individual that was featured prominently in the photos?

Thank you for your time and diligence in completing this Success Story interview, taking photos, and getting the waivers signed by all those featured in the photos. Your partnership and work on the ground is of the highest value, and we appreciate all you do!

Thank you!
PERMISSION FOR PHOTOGRAPHY AND VIDEO

I grant to IMA World Health the absolute and irrevocable right and unrestricted permission concerning any photographs and/or video taken of me or in which I may be included with others, to use, reuse, publish, and republish the material in whole or in part, individually or in connection with other material, in any and all media now or hereafter known, including the internet, and for any purpose whatsoever, specifically including illustration, promotion, art, editorial, advertising, and trade, without restriction as to alteration; and to use my name in connection with any use if desired.

I release and discharge IMA World Health from any and all claims and demands that may arise out of or in connection with the use of the photographs or video, including without limitation any and all claims for libel or violation of any right of publicity or privacy.

I am a legally competent adult and have the right to contract in my own name. I have read this document and fully understand its contents. This release shall be binding upon me and my heirs, legal representatives, and assigns.

__________________________________________
SIGNATURE

__________________________________________
NAME

__________________________________________
ADDRESS (Line 1)

__________________________________________
ADDRESS (Line 2)

__________________________________________
DATE

__________________________________________
WITNESS

__________________________________________
ADDRESS (Line 1)

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ADDRESS (Line 2)