

Guidelines on WT Cares Program



Table of contents

Chapter 1. Introduction	004
1. Introduction	005
Chapter 2. About WT Cares	006
2. About WT Cares	006
2.1. Vision	007
2.2. Mission	008
2.3. Objectives and Strategies	009
2.4. Values	010
Chapter 3. Application	011
3. Application	011
3.1. Application Form	012
3.1.1. Organization Information	012
3.1.2. Project Description	012
3.1.3. Authorization	012
3.1.4. Submission	012
3.1.5. Eligibility/Qualification	012
3.2. Proposal	013
3.2.1. Project Information	013
3.2.2. Overview	013
3.2.3. Objectives	013
3.2.4. Action Plans and Timeline	013
3.2.5. Budget	013
3.2.6. Others	013
Chapter 4. Cooperation Agreement	014
4. Cooperation Agreement	014
4.1. Cooperation Agreement	015
4.2. Invoice and Banking Details	016
Chapter 5. Promotion	017
5. Promotion	017
5.1. Banners	018
5.2. Uniforms	020
5.3. Opening Ceremony	021
5.4. Quality Photos and Videos	022
5.5. Others	023
Chapter 6. Monitoring	024
6. Monitoring	024
6.1. Attendance	025

Table of contents

6.2. Quarterly and Midterm Reports	026
6.2.1. Project Information	026
6.2.2. Task Overview	026
6.2.3. Budget Overview	026
6.2.4. Conclusion	026
6.2.5. Notes	026
6.2.6. Media Resources	026
6.3. Final Report	027
6.3.1. Project Information	027
6.3.2. Project Overview	027
6.3.3. Task Overview	027
6.3.4. Budget Overview	027
6.3.5. Conclusion & Recommendations	027
6.3.6. Notes	027
6.3.7. Media Resources	027
Chapter 7. Evaluation	028
7.Evaluation	028
7.1. Consent Form	029
7.2. Pre-Evaluation	030
7.3. Midterm Evaluation	031
7.4. Post Evaluation	032
Chapter 8. Appendix	033
8.Appendix	033
8.1. Application Form	034
8.2. Proposal	035
8.3. Cooperation Agreement Information	037
8.4. Invoice and Banking Details Information	038
8.5. Attendance Sample	040
8.6. Quarterly Report	041
8.7. Midterm Report	043
8.8. Final Report	045
8.9. Consent Form	047
8.10. Self-Esteem Evaluation Sample	048
8.11. Positive and Negative Feelings Evaluation Sample	049
8.12. Perceptions and Expectations Evaluation Sample	050
8.13. Taekwondo Lessons Evaluation Sample	051
8.14. WT Cares Program Overall Evaluation	053

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Chapter 01.

Introduction

1. Introduction

As an International Federation (IF) belonging to the Olympic Movement, World Taekwondo (WT) is committed to safeguard the Olympic values and reinforce the role of sport in society. In this realm, WT complies with the principles of good governance where development and solidarity play an important role. WT Cares is part of WT Development program that aims to provide support including resources, education, and training to its Continental Unions (CUs), Member National Associations (MNAs), and related stakeholders. The objectives are to ensure the growth of Taekwondo at every level, in every country, and to enhance stakeholders' own capacities and technical expertise. In addition, WT aims to enhance cooperation with CUs, MNAs, and any other partnering organizations to implement development programs and increase participation and accessibility.

In its commitment to instituting good governance at every level of the sport and being one of the best governed IFs, WT has developed the following guidelines concerning the application process for WT Cares program and following procedures. The guideline is divided into seven sections including introduction, information about WT Cares, application, cooperation agreement, promotion, monitoring, and evaluation.

See our website for more information:

<http://www.worldtaekwondo.org/development-wt/program.html>

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Chapter 02.

About WT Cares

2.1. Vision

Cares program shares WT vision “Taekwondo for All”, in addition, the program aims to achieve “World peace through Taekwondo.”

***Taekwondo for All
World Peace through
Taekwondo***

2.2. Mission

Provide taekwondo to the most in need and empower the powerless in developing countries

***Provide taekwondo to the
most in need
Empower the powerless in
developing countries***

2.3. Objectives and Strategies

Promote taekwondo worldwide, especially in developing countries, as a sport for all

Provide the disadvantaged with opportunities to learn taekwondo and participate in taekwondo events

Support the disadvantaged with necessary taekwondo equipment and/or educational programs by dispatching local taekwondo coaches to teach them taekwondo spirit and techniques

Give hope and dreams to the disadvantaged, thus helping promote world peace

***Promote taekwondo
worldwide, especially in
developing countries, as a
sport for all***

2.4. Values

WT Cares' core values include the ideals that the program stands for and believes in.

Inclusiveness

Leadership

Respect

Indomitable Spirit

Perseverance

Self-Control

Chapter 03.

Application

3.1. Application Form

3.1.1. Organization Information

- The country name, organization name, name of president, postal address, contact number, and official email must correspond to the information of the Member National Association (MNA) of World Taekwondo (e.g., Sri Lanka Taekwondo Federation)
- Provide the contact details of the person filling the application form including name, position, email, and contact number

3.1.2. Project description

- Choose the target population and budget for 1 year project
 - Target population could be street children, alcohol and drug addicts, domestic violence victims, orphans, reformatory inmates, etc.
 - Budget could vary depending on the project. Choose the budget category that better matches its objectives and requirements
- Describe the project by briefly providing the following details:
 - Rationale for the implementation of the project
 - Objectives
 - Participants
 - Centers
 - Instructors
 - Tentative training schedule

3.1.3. Authorization

- Name and signature of the MNA President is required

3.1.4. Submission

- The application form must be filled out and submitted to cares@worldtaekwondo.org

3.1.5. Eligibility/Qualification

- Carefully read the Guidelines on 2022 Development Program to ensure that the organization is eligible and qualified

3.2. Proposal

3.2.1. Project Information

- Project: WT Cares (Name of the country) 202x-202x (e.g., WT Cares Bhutan 2022-2023)
- Title: choose a title that matches the objectives of the project (e.g., "Road to Recovery through Taekwondo")
- Duration: 1 year from the expected starting date (e.g., June 1, 2022, to May 31, 2023)
- Objectives: describe the objectives of the project as in the application form
- Target group: describe the target population chosen in the application form
- Number of participants: provide the total number of participants that will benefit from the project
- Location(s): list the locations and names of each center
- Executing Organization: MNA of World Taekwondo (e.g., Bhutan Taekwondo Federation)
- National Implementation: briefly describe the execution plan
- Instructor(s): list the instructor(s) in charge of the taekwondo education and others
- Facilitator(s): list the facilitator(s) in charge of the delivery of the project (if any)
- Administrator(s): list the administrator(s) in charge of the entire project who should be the main communicator(s) between the MNA and WT

3.2.2. Overview

- Provide the rationale for the implementation of the project in the country. A study background, project significance, and expected outcomes are suggested.

3.1.3. Objectives

- List the general and specific objectives of the project

3.1.4. Action Plans and Timeline

- Provide a tentative schedule for the 1-year project. Activities and contents covered in the classes should be briefly described.

3.1.5. Budget (Estimated)

- The following categories are suggested to be considered for 1-year project:
 - Opening ceremony: banners, photography, videos, stationary, event coverage, etc. (see Chapter 5. Promotion).
 - Taekwondo equipment: gear (head, chest protector, kicking pads), uniforms (according to the number of students), matt (consider the centers and available space)
 - Staff salary: monthly payment for instructor(s) and administrator(s)
 - Activity cost: grading ceremony (belts and certificates), competitions (registration fee), miscellaneous (stationary, emergency kits, printer, camaras, laptop, etc.)
 - Closing ceremony: as opening ceremony
 - Total cost: provide the total cost as an integer number (e.g., US\$ 30,000.00) that matches the total budget chosen in the project description in the application form

3.1.6. Others

- Resumes of the instructor(s), facilitator(s), and administrator(s) must be attached to the proposal

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Chapter 04.

Cooperation Agreement

4.1. Cooperation Agreement

The following information must be submitted:

- Official abbreviation of the MNA (e.g., Bhutan Taekwondo Federation as BTF)
- Exact address of the MNA
- Official email for communication between the MNA and WT
- Name of the President of the MNA
- Banking details* for reimbursement including:
 - Name of Bank
 - Address of Bank
 - Bank Swift Code
 - Account Number
 - Name of Account
 - Address of Account
 - Intermediary Bank

*The banking details MUST correspond to the official organizational bank account of the MNA

4.2. Invoice and Banking Details

After signing the cooperation agreement, the invoice should be sent with the following information:

- MNA official header
- Date
- WT address
- Project duration
- Description: title of the project (e.g., “Road to Recovery through Taekwondo Project”)
- Total amount in USD
- Banking details for reimbursement: same as the provided for the cooperation agreement (to confirm they are correct)
- Name and signature of the MNA’s president in the invoice page and banking details page

After sending the invoice and receiving the funds, an appropriate financial report should be submitted including copies of receipts and relevant documents.

Chapter 05.

Promotion

5.1. Banners

Banners must include the following titles:

- World Taekwondo
- Funding organization name (e.g., Asia Development Foundation ADF)

Banners must have the following logos:

- WT logo
- Funding organization logo (e.g., Asia Development Foundation ADF)

Banners could also include:

- MNA name (e.g., Bhutan Taekwondo Federation)
- MNA logo
- Title of the project and year (e.g., Road to Recovery through Taekwondo 20xx-20xx)
- WT Cares (Name of the country) 202x-202x (e.g., WT Cares Bhutan 2022-2023)
- WT Slogan: "Peace is more precious than triumph"

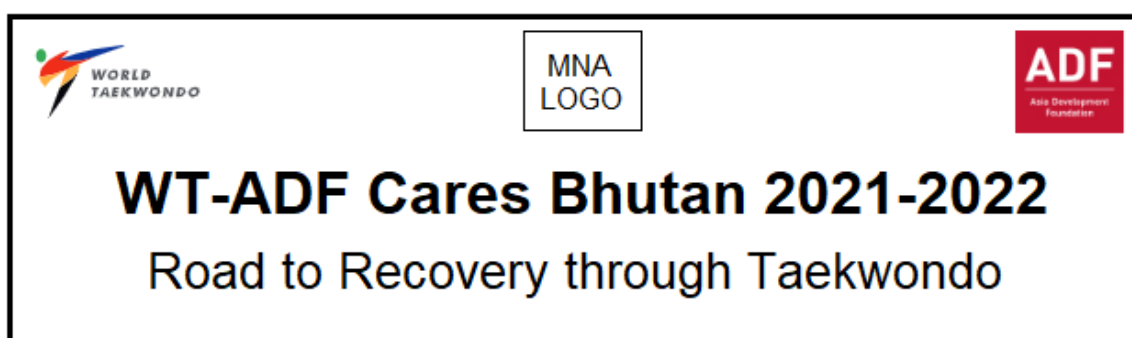
Four options for the suggested design of the banners with locations of the logos and titles can be found below.

5.1. Banners

Option 1



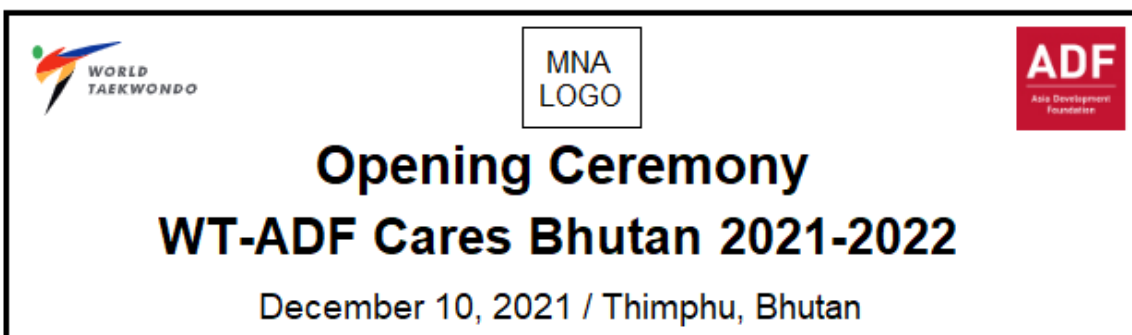
Option 2



Option 3



Option 4



5.2. Uniforms

Uniforms must have:

- World Taekwondo abbreviation as “WT”
- Funding organization abbreviation (e.g., “ADF”)
- “Cares” word
- Country name
- WT logo
- Funding organization logo (e.g., Asia Development Foundation ADF)

An example of the uniform design with locations of the logos and abbreviations (front and back) can be found below.



5.3. Opening Ceremony

There are two options for the opening ceremony of a Cares project:

- Option 1
 - Execution: at local level with MNA representatives, instructor(s), administrator(s), and students
 - Date: subject to MNA's decision as soon as the students receive their uniforms, and the banners are ready
- Option 2
 - Execution: at international level with the presence of WT president and WT Exhibition Team. WT presence must be priorly requested in writing. MNA representatives, instructor(s), administrator(s), and students must attend.
 - Date: subject to WT availability and schedule

5.4. Quality Photos and Videos

Quality photos and videos of WT Cares different activities should be attached and submitted in the reports (quarterly, midterm, and final report, see Chapter 6. Monitoring).

Photos and videos of the main events should be provided such as opening ceremony, closing ceremony, delivery of uniforms and equipment, etc.

Banners should be used for the main events.

Photos of the usual scheduled training should be attached as well as any link to available videos.

5.5. Others

Any other type of promotion of WT Cares activities is highly recommended such as participation in contests at national and international level, storytelling, promotional or motivational videos, etc.

WT Cares students are eligible to participate for free at different international events (offline and online) coordinated by related organizations.

Chapter 06.

Monitoring

6.1. Attendance

Attendance of the students at every center must be registered and reported to evaluate the success of the program.

Attendance is an important factor for evaluation of the project in the country (see Chapter 7. Evaluation), a template is provided in the Appendix.

6.2. Quarterly and Midterm Reports

The administrator of the project must provide quarterly, midterm, and final reports which templates can be found in the Appendix. The quarterly and midterm report should contain the following:

6.2.1. Project Information

- The project information must be the same that was provided in the proposal.

6.2.2. Task Overview

- Task: list all the task or activities proposed in the “Action Plans and Timeline” section of the proposal
- Status: provide the status of each task or activity until the date of the submission of the report (e.g., “finished”, “30% completed”, “not yet started”, “suspended”, etc.)
- Date: provide the date of the beginning of the execution of the task or activity

6.2.3. Budget Overview

- Category/task: List all the categories with their specific tasks or activities where the budget has been spent until the date of the submission of the report. The categories in the “Budget” section of the proposal should be followed (e.g., Category/task: Taekwondo equipment/uniforms).
- Spent: provide the amount spent in US dollars and the percentage of the total amount given for that category
- Total cost: sum up the amount spent in each category/task and provide the total cost and the percentage of the total amount provided for the entire project

6.2.4. Conclusion

- Provide the main conclusions observed after the implementation of the project until the date of the submission of the report

6.2.5. Notes

- Describe any inconvenient or difficulty faced in the development of the project until the date of the submission of the report
- Challenges faced should also be described along with suggestions and recommendations

6.2.6. Media Resources

- Provide any link to media resources including but not limited to SNS (i.e., social media), photos, videos, newspaper articles, webpage articles, TV announces, etc.
- Attach photos of each center's activities

6.3. Final Report

For the final report, the information provided in the previous reports will be required as well as additional information as described below.

6.3.1. Project Information

- As in previous reports

6.3.2. Project Overview

- Provide a summary of the project
- Briefly indicate the implementation process, the challenges faced, the objectives that were met and those that failed to be met

6.3.3. Task Overview

- As in previous reports

6.3.4. Budget Overview

- As in previous reports

6.3.5. Conclusion & Recommendations

- Provide the main conclusion of the project. In addition, make recommendations and suggestions for the betterment of WT Cares projects in the future

6.3.6. Notes

- Describe any inconvenient, challenges, stories, or any comment regarding the project

6.3.7. Media Resources

- As in previous reports
- Include the media resources from the closing ceremony

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Chapter 07.

Evaluation

7.1. Consent Form

All WT Cares participants voluntarily taking part in the evaluation must sign a consent form prior to it. If the participants are under-age, the consent form must be signed by their parents or legal guardians.

A sample of the consent form is attached in the Appendix, it should be translated into local languages.

7.2. Pre-Evaluation

Pre-Evaluation must be done to WT Cares participants and staff including instructors and administrators at the beginning of the project.

- Participants must be evaluated through questionnaires or surveys depending on the objectives of the project. For example, if the project was designed to improve the students' self-esteem, a questionnaire assessing that trait should be employed.
- Staff must be evaluated through questionnaires or surveys regarding their perceptions and expectations of the program.

Samples for the evaluation both to participants (e.g., self-esteem evaluation, positive and negative feelings evaluation) and staff (survey for perceptions and expectations) are attached in the Appendix.

The samples are just guides. The evaluation should be done according to the objectives of each project. Questionnaires and surveys should be translated into local languages.

7.3. Midterm Evaluation

Midterm evaluation must be done after six months of the beginning of the project to WT Cares participants and staff concerning the taekwondo classes.

- Participants must be evaluated through the same questionnaire or survey employed in the pre-evaluation.
- The taekwondo lessons must be evaluated by participants through questionnaires or surveys as well.

A sample for the evaluation of the taekwondo lessons is attached in the Appendix.

The sample is just a guide. The evaluation should be done according to the objectives of each project. Questionnaires and surveys should be translated into local languages.

7.4. Post-Evaluation

Post-Evaluation must be done to WT Cares participants and staff including instructors and administrators at the end of the project.

- Participants must be evaluated through the same questionnaires or surveys employed in the pre-evaluation and midterm evaluation.
- Taekwondo lessons must be evaluated by participants with the same questionnaires or surveys used in the midterm evaluation.
- In addition, staff must be evaluated regarding their overall satisfaction of WT Cares program.

The survey for the overall evaluation of WT Cares program is attached in the Appendix. If needed, it should be translated into local languages.

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Chapter 08.

Appendix

2024 WT CARES PROGRAM APPLICATION FORM



A. ORGANIZATION INFORMATION

Country Name:				
Organization Name:				
Name of President:				
Postal Address:				
Contact Number:				
Office Email:				
Contact details of person in charge of this application:	Name	Position	Email	Contact Number

B. PROJECT DESCRIPTION

1 Year Project	Target	<input type="checkbox"/> Street Children <input type="checkbox"/> Orphans <input type="checkbox"/> Alcohol/Drug Addicts <input type="checkbox"/> Reformatory inmates <input type="checkbox"/> Domestic Violence Victims <input type="checkbox"/> Others (_____)
	Budget	<input type="checkbox"/> 15,000USD <input type="checkbox"/> 20,000USD <input type="checkbox"/> 25,000USD <input type="checkbox"/> Others (_____ USD)
Detailed Project Description		

C. AUTHORIZATION

Name and Signature of President	
---------------------------------	--

D. SUBMISSION

Please fill out and submit this application to the WT Cares Program of the WT Member Relations and Development department at cares@worldtaekwondo.org

E. ELIGIBILITY / QUALIFICATION

Please carefully read the Guidelines on 2024 Development Program to ensure your organization is eligible and qualified



Project Proposal

A. PROJECT INFORMATION	
Project	
Country	
Title	
Duration	
Objectives	
Target Group	
Number of Participants	
Location(s)	
Executing Organization	
National Implementation	
Instructor(s)	
Facilitator(s)	
Administrator(s)	

B. OVERVIEW

C. OBJECTIVES



D. ACTION PLANS AND TIMELINE

No.	Date (Month)	Activity
01		
02		
03		
04		
05		
06		
07		
08		
09		
10		
11		
12		

E. BUDGET (Estimated)

Notes: Please list the names and estimated budget of the activities in specific. If there is more than one center, please list the amount separately. Also, if you plan on using the budget of a single activity in various ways, explain the specific breakdown on the note column.

For more information, please refer to the attached file as an example.

No.	Activity	Center	Center	Note
		1	2	
		Amount in USD		
Total Cost				

2024 WT CARES PROGRAM INFORMATION FOR THE COOPERATION AGREEMENT



Information for the Cooperation Agreement

A. COOPERATION AGREEMENT INFORMATION	
Official abbreviation of the MNA	
Exact address of the MNA	
Official email for communication	
Name of the President of the MNA	
B. BANKING DETAILS FOR REIMBURSEMENT	
Name of Bank	
Address of Bank	
Bank Swift Code	
Account Number	
Name of Account	
Address of Account	
Intermediary Bank	

MNA Official Header

INVOICE

Date

World Taekwondo,
Booyoung Taepyung Building 10th Floor, 55, Sejong-daero (Taepyung-ro 2ga), Jung-
gu, Seoul, Republic of Korea, 04513

Taekwondo Cares Program

From Date to Date

Description	Total Amount (USD)
<i>Project</i>	
Total	

Bank details are attached herewith.

Sincerely,

Name and signature of the President of the MNA

MNA Official Header

Banking Detail Form for Reimbursement

BANKING DETAILS FOR REIMBURSEMENT	
Name of Bank	
Address of Bank	
Bank Swift Code	
Account Number	
Name of Account	
Address of Account	
Intermediary Bank	

Sincerely,

Name and signature of the President of the MNA

2024 WT CARES PROGRAM ATTENDANCE SAMPLE



Weekly Class Attendance							
Center							
Coach's Name							
Time and Period							
Month							
Year							
Student's Name	M	Tu	W	Th	F	Sa	Su
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							
16.							
17.							
18.							
19.							
20.							



QUARTERLY REPORT

A. PROJECT INFORMATION	
Country	
Title	
Duration	
Objectives	
Target Group	
Number of Participants	
Location(s)	
Executing Organization	
National Implementation	
Instructor(s)	
Facilitator(s)	
Administrator(s)	

B. TASK OVERVIEW		
Task	Status	Date

C. BUDGET OVERVIEW			
<i>Please divide the columns for a detailed overview if 2 or more locations were used.</i>			
Category/Task	Spent	% of Total	Notes
Total Cost			In total:



D. CONCLUSION

E. NOTES

F. MEDIA RESOURCES



MIDTERM REPORT

A. PROJECT INFORMATION	
Country	
Title	
Duration	
Objectives	
Target Group	
Number of Participants	
Location(s)	
Executing Organization	
National Implementation	
Instructor(s)	
Facilitator(s)	
Administrator(s)	

B. TASK OVERVIEW		
Task	Status	Date

C. BUDGET OVERVIEW			
<i>Please divide the columns for a detailed overview if 2 or more locations were used.</i>			
Category/Task	Spent	% of Total	Notes
Total Cost			In total:



D. CONCLUSION

E. NOTES

F. MEDIA RESOURCES



FINAL REPORT

A. PROJECT INFORMATION

Country	
Title	
Duration	
Objectives	
Target Group	
Number of Participants	
Location(s)	
Executing Organization	
National Implementation	
Instructor(s)	
Facilitator(s)	
Administrator(s)	

B. PROJECT OVERVIEW

C. TASK OVERVIEW

Task	Status	Date

2024 WT CARES PROGRAM FINAL REPORT



D. BUDGET OVERVIEW
Please divide the columns for a detailed overview if 2 or more locations were used.

Category/Task	Spent	% of Total	Notes
Total Cost			In total:

E. CONCLUSION & RECOMMENDATIONS

F. NOTES

G. MEDIA RESOURCES

2024 WT CARES PROGRAM CONSENT FORM



WT Cares Program Consent Form

Purpose

This Consent Form is designed to confirm that the participants have been given all relevant information about the evaluation process of WT Cares Program, their role within it, and how the data is confidential and protected. Please read the following statements fully and carefully.

Consent

By proceeding to take this questionnaire, I _____ agree to take part in the evaluation process of WT Cares program and to the following statements:

1. I volunteer to take part in this evaluation questionnaire.
2. I understand that the questionnaire is designed to evaluate WT Cares Program effectiveness and impact.
3. I understand that I can choose not to take part in the evaluation at any time.
4. I understand that the data collected in this questionnaire will be treated in strict confidence and kept anonymous and secured.

Date:

Signature of Participant

Signature of Parent/Legal Guardian

2024 WT CARES PROGRAM EVALUATION



WT Cares Program Evaluation – Participants Self-Esteem Evaluation

Date:

Center/Country:

Age:

Gender:

Below is a list of statements dealing with your general feelings about yourself. Please indicate how strongly you agree or disagree with each statement. Mark with an “X” accordingly.

Questions	Strongly Disagree	Disagree	Agree	Strongly Agree
1. I feel that I am a person of worth, at least on an equal plane with others				
2. I feel that I have a number of good qualities				
3. I am inclined to feel that I am a failure				
4. I am able to do things as well as most other people				
5. I do not have much to be proud of				
6. I take a positive attitude towards myself				
7. On the whole, I am satisfied with myself				
8. I certainly feel useless at times				
9. I wish I had more respect for myself				
10. At times I think I am no good at all				

2024 WT CARES PROGRAM EVALUATION



WT Cares Program Evaluation – Participants Positive and Negative Feelings Evaluation

Date:

Center/Country:

Age:

Gender:

How did you feel last week? Mark with an “X” accordingly.

Questions	Never	On one day	On a few days	Most days	Everyday
1. I felt happy					
2. I felt sad					
3. I had lots of energy					
4. I felt tired					
5. I kept waking up in the night					
6. I got on with my friends and family					
7. I felt good about myself					
8. I felt satisfied with how my life has turned out so far					

Questions	Agree	Disagree
1. I am always optimistic about my future		
2. When things go wrong in my life, it generally takes me a long time to get back to normal		
3. I feel I am free to decide how to live my life		
4. I generally feel that what I do in my life is valuable and worthwhile		
5. There are people in my life who really care about me		

2024 WT CARES PROGRAM EVALUATION



WT Cares Program Evaluation - Staff Program Perceptions and Expectations

Date:

Center/Country:

Position within WT Cares Project:

Please read carefully and answer the following questions.

1. What do you think about WT Cares Program in general?

2. What are your expectations about the outcomes of this program?

3. What challenges do you think you will face?

4. What do you think about the participants' attitudes towards taekwondo?

5. What benefits do you think the participants will obtain from this program?

2024 WT CARES PROGRAM EVALUATION



WT Cares Program Evaluation – Taekwondo Lessons

Date:

Center/Country:

Age:

Gender:

How do you feel about your taekwondo lessons? Mark with an “X” accordingly.

Questions	Disagree	Neutral	Agree
1. I am satisfied with my Taekwondo classes			
2. I'm treated differently from the other children in my taekwondo classes			
3. I'm treated the same as other children in my taekwondo classes			
4. I have my own equipment for my taekwondo trainings			
5. I would like to participate in taekwondo championships			
6. I would like to become a taekwondo athlete			
7. I feel happy after taekwondo classes			
8. I play games during my taekwondo classes			
9. My teacher proposes different activities other than taekwondo			
10. My training partners are also my friends			
11. I would like to train other kind sports			
12. I would like to train other martial arts			
13. My teacher encourages me during the taekwondo classes			
14. My teacher gets nervous when I cannot do an activity			
15. I feel welcome in the Dojang			
16. The Dojang is always clean			
17. My colleagues bullying me when I cannot do something during the taekwondo classes			
18. When I am unable to perform a proposed activity in taekwondo classes, I give up			
19. I feel safe in my taekwondo classes			
20. I always have energy for my taekwondo classes			
21. I invite my friends to my taekwondo classes			

2024 WT CARES PROGRAM EVALUATION



22. I think I will give up my taekwondo classes and start another sport			
23. It happens that I want to hit someone during my taekwondo classes			
24. I feel angry during my taekwondo classes			
25. I think that boys and girls have the same competences			
26. I think that taekwondo is only for boys			
27. I don't mind if my teacher is a man or a woman			

2024 WT CARES PROGRAM EVALUATION



WT Cares Program Overall Evaluation

Date:

Country:

Position within WT Cares Project:

WT Cares appreciates your help in evaluating this program. Please read carefully and answer the following questions to the best of your ability.

A. PROGRAM INFORMATION	
1. Name of the Program	
2. Project Duration	
3. Location of the Program	
4. Program's purpose and objectives	
5. Program's center(s)	

B. STUDENTS	
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1. How many students participated in your program per location(s)?

2. What were the challenges concerning students? If any challenges occurred, how were challenges handled and how can they be better handled in the future?

3. At the start of the program, how were the student's attitudes towards taekwondo? How did these attitudes affect taekwondo practices? Did these attitudes change by the end of the program?

2024 WT CARES PROGRAM EVALUATION



4. At the start of the program, did students have any behavioral problems? How did these behavioral problems affect taekwondo practices? Did these behavioral problems change by the end of the program?

5. How has the program impacted the student's lives?

6. After the completion of the program, have the students continued to practice taekwondo?

7. What belt levels have the students reached?

8. Have the students practiced in any competitions outside of the program? (Online or in-person)

9. Are there any noteworthy achievements?

2024 WT CARES PROGRAM EVALUATION



Please read carefully and indicate how strongly you agree or disagree with each statement. Mark with an “X” accordingly.

C. Questions	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
1. The program was able to meet its objectives					
2. The program is too short to see any changes in the students					
3. The program’s duration (1 year) was too long					
4. The program’s funding was not enough					
5. The program made a positive impact in student’s lives					
6. We would like to continue the program for another year					
7. We would change the centers we chose to work with					
8. We would expand the number of centers we have					
9. We would keep the same number of centers					
10. The number of students was too high					
11. Students continue to practice taekwondo even after the program					

D. LOCAL LEVEL

1. Was the program featured in any local or national newspapers or television? (Please link or attach newspaper articles or pictures)



E. WORLD TAEKWONDO CARES

1. How was the communication between World Taekwondo and the program? Were there any difficulties with communications? Would there be a better way of communicating with WT?

2. Were there any difficulties or challenges in receiving the funds? Would you change the process of receiving the funds?

3. Were there any overall difficulties or challenges in working with the WT-ADF Cares Program?

4. Please feel free to write recommendations or comments.
