

LEADERS PROJECT EVALUATION

Your name(s): _____

(Agency)

(City)

(State)

(Dates of Project)

1. Were you able to contact the agency prior to your arrival and get an update on the work to do?
YES NO

2. Was the host agency prepared for your arrival? YES NO
(Parking ready, prioritized work list, materials available, coordinator readily available)

3. Was the parking as described on the application? YES NO
Comments/Recommendations:

4. Did your interface with the agency personnel during the project go smoothly? YES NO
If no, give details and recommendations on another page.

5. If the Agency received NOMADS Materials Funds, how much was received? _____
Did the agency spend this money on your project? YES NO

6. Would you recommend NOMADS return to this agency? _____ Yes _____ No
In no, please give details on another page.

7. Were individual team members cooperative? _____
Summarize any problems encountered on another page.

8. Were there other experienced NOMADS leaders on your team? YES NO
Were they cooperative?

9. Would you recommend any of your team members who are not Leaders to become leaders?

10. Were there any "problems" related to anyone on your team arriving late or leaving early or
NOMADS visitors who "dropped by" during work hours? YES NO
Summarize any problems encountered on another page.

11. Did anyone on your Team need immediate medical attention or have significant health
problems? YES NO Comments:

12. Other comments (Please use a second page if needed)