

COMMUNITY BUILDER EVALUATION

(POST-COMMUNITY BUILDER)

Name: _____ Living Area: _____

Name of Community Builder: _____

Date and Time of your Community Builder: _____

Did you meet your residents' needs through this community builder?

(Social, vocational, academics, spiritual, etc.)

What type of community builder was it?

Social Educational Spiritual other _____

What unexpected events occurred, and how did they affect your community builder?

Were any other departments or staff persons involved as collaborators or co-sponsors of this community builder? If so, which one and how were they involved?

Please rate the success of this community builder in the following areas on a scale of 1-4.

(1=unsuccessful, 2= fairly successful, 3= successful, 4=extremely successful)

_____ Planning/ Organizing community builder

_____ Accomplishing the purpose of the community builder

_____ Attendance: how many? _____

_____ Advertising: what did you do? _____

_____ Managing budget

How much money did you spend on this community builder? Where did it come from? \$ _____

Total

\$ _____ On food

\$ _____ From money raised through fund-raisers

\$ _____ On publicity

\$ _____ From money paid by participants

\$ _____ On speaker/ presenter

\$ _____ From money community builder budget

\$ _____ Other expenses _____

\$ _____ From other sources _____

How much money do you have remaining in your semester budget? \$ _____

What was successful about your community builder?

What would you have done differently were you to do it again?

RD Signature _____