## ROAM PROJECT EVALUATION

Project: Date: $\qquad$

Project Location: $\qquad$

Based on your experience at this project, please give us your opinion on the following questions by selecting the appropriate rating number from the drop down menu. If you have additional comments, please feel free to note them. We appreciate your comments.

5-Excellent, 4-Good, 3-OK, 2-Poor, 1-Not Applicable

1. Were RV sites satisfactory? $\square$
2. If you worked with other ROAM members:
a. The relationship of the team members to the team leader was...... $\square$
b. Interaction of team members was.. $\qquad$
$\square$
3. Your interaction with the local people was.... $\square$
4. Your communication with the ROAM office was.... $\square$
5. The planning and execution of this project was...... $\square$
6. What overall rating would you give this $\square$
ROAM experience?

QUESTIONS ABOUT YOUR PARTICIPATION WITH ROAM
What features did you like about the project?

How could we have made this project better?

How many projects are you willing to commit to in a year? $\qquad$

If needed, would you be willing to be a team leader in future ROAM projects? $\qquad$

Any further comments $\qquad$

NAME $\qquad$ (Optional)

PLEASE MAIL OR EMAIL THIS EVALUATION SHEET TO:

ROAM<br>PO Box 480876<br>Kansas City, MO 64148<br>Email: office@rvsonamission.org

Thank you so much for your willing participation in this project. Keep in touch.

