



A Nazarene Lay Ministry

PROJECT DIRECTOR's EVALUATION OF ROAM TEAM

Project: _____ Date: _____

Project Location: _____

Your thoughts are important as we try to provide the best possible ROAM project experience. Share any concerns you may have so that we can address issues that might create challenges for additional projects. Also, if there was noteworthy service by any ROAMers, we'd be happy to hear of that as well.

	Excellent	Good	Fair	Poor	NA
1. ROAM members arrived on schedule.	4	3	2	1	NA
2. The relationship of the team leader to the host and team members	4	3	2	1	NA
3. Interaction of team members was.....	4	3	2	1	NA
4. Interaction of team members with local people was.....	4	3	2	1	NA
5. Communication with the ROAM office was....	4	3	2	1	NA
6. The work accomplished by ROAMers was....	4	3	2	1	NA
7. What overall rating would you give this ROAM experience?	4	3	2	1	NA

Additional comments about the experience with ROAM Members for this project.

NAME _____ (Optional)

Please Mail To: ROAM, Inc., PO Box 480876 Kansas City, MO 64148 or Contact the ROAM office by email or phone with concerns or other issues.

Email: office@rvsonamission.org Phone: 816-941-7711 or 816-888-4840