



NORTH CAROLINA CAMPUS COMPACT



NORTH CAROLINA-ACTIVATING CITIZENSHIP THROUGH SERVICE!

Site Supervisor Member Evaluation

The following evaluation will provide NC Campus Compact with feedback related to the service and support provided by your *NC-ACTS! AmeriCorps* member this year. The information will be used to strengthen provide data regarding the impact of AmeriCorps members in our communities. This is a required evaluation for your *NC-ACTS! AmeriCorps* member to successfully complete the program, and s/he will submit it with his/her Exit Paperwork.

Directions: Please complete the evaluation as accurately and completely as possible. This form is also available for download at the NC Campus Compact website <http://org.elon.edu/nccc/NC-ACTS/forms.html>. If you complete the form online you must still send in the signed original.

NC-ACTS! AmeriCorps Member's Name: _____
(Please Print)

The three focus areas of the NC-ACTS! program are Education, Human Services/Needs and Volunteer Recruitment. Please indicate which area was the primary focus of this member's service activities at your Site.

- Education Human Services/Needs Volunteer Recruitment*

**If the Member engaged primarily in volunteer recruitment, you must answer #2 on the next page.*

Please check the appropriate category (one) that most accurately describes your Site.

- | | |
|---|--|
| <input type="checkbox"/> Child/Youth Organization | <input type="checkbox"/> Elder Care/ Senior Center |
| <input type="checkbox"/> Environmental Agency | <input type="checkbox"/> Faith-based Organization |
| <input type="checkbox"/> K-12 School | <input type="checkbox"/> Health/Mental Health Organization |
| <input type="checkbox"/> Arts/ Cultural Organization | <input type="checkbox"/> Immigrant Service Organization |
| <input type="checkbox"/> Social Service Organization | <input type="checkbox"/> Other (Please specify) |
| <input type="checkbox"/> Campus Community Service/Service-Learning Office | _____ |

Please rate the NC-ACTS! member below.

	Strongly Agree 1	Agree 2	Disagree 3	Strongly Disagree 4
The <i>NC-ACTS!</i> member was reliable in performing their duties.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The <i>NC-ACTS!</i> member benefited our organization's clients/students/ and or mission.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The <i>NC-ACTS!</i> member helped to increase our organization's capacity to serve local community needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The <i>NC-ACTS!</i> member was an asset to our organization.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1. In what quantitative or measurable ways did the NC-ACTS! member impact your organization and its clientele? (i.e. # of students whose reading levels increased, # of families who found housing, # of trees planted, # of community members recruited to participate in service, etc.)

*** This question is regarding members focused on Volunteer Recruitment *primarily***

2. How many volunteers did this member recruit? _____

3. In what *qualitative* or descriptive ways did the NC-ACTS! member impact your organization and its clientele?

Additional Comments:

Site Name: _____

North Carolina County(s) this Site serves: _____

Site Supervisor Name: _____
(Please Print)

Site Supervisor Signature: _____ Date: _____

Thanks for completing the evaluation and for your support of an *NC-ACTS! AmeriCorps* member at your site. Please return to your *NC-ACTS!* member or their Campus Coordinator.