Sharing the Stories

ID:			



Youth Meeting/Activity Evaluation - Participants

Confidentiality: Your answers are confidential; only your organization, program and activity will be entered with your answers, not your name.

Consent:

- Your participation in this survey is voluntary. Not participating in the survey won't affect your participation in the program.
- You can choose not to participate at any time until you hand in your survey.
- You can choose not to answer any questions if you do not want to. Leave them blank

This survey will take you about 10 minutes to fill out. It has 13 questions. Thank you for your help!

YM1 Activity score composite

Please fill out this short evaluation of today's meeting/activity. Thanks.
Location:
Date:
1. On a scale of 1 to 5 please rate the meeting/activity (5 being excellent): The meeting/activity was: 0 1 0 2 0 3 0 4 0 5
2. The high point of the meeting/activity was:
3. The high point scored (On a scale of 1 to 5, 5 being excellent: O 1 O 2 O 3 O 4 O 5
4. Comments:
Please choose how much you agree with these sentences (5 agree strongly, 1 disagree strongly, 3 is in the middle):
5. I felt I contributed a lot in the meeting/activity.
It scored: O 1 O 2 O 3 O 4 O 5
6. This meeting/activity was productive.
It scored: O 1 O 2 O 3 O 4 O 5
7. I learned something new.
It scored: O 1 O 2 O 3 O 4 O 5
8. Comments:

Continued on next page.

Please score the following (1 = "The Lowe	est" or "Not at all" and 5 "Totally Good"):	
9. The high point of my day was:		
10. It scored: O 1 O 2 O 3 O 4	O 5	
11. The low point of my day was:		
12. It scored: 0 1 0 2 0 3 0 4	O 5	
13. Comments:		
Your Feedback		
	back, suggestions, comments on this survey/too	
ii you would like to, please give us your leed	back, suggestions, comments on this survey/too	
Organization:	Program:	Activity: