

USA High School Supervisor's Community Project Evaluation Form

Dear Organization Supervisor,

Please complete all of the following questions to help us assess and evaluate this student's chosen *Community Project*.

Student Name:		
Student ID Number (ex. ABC08001):		
Name of Supervisor:		
Position:		
Name of Organization:		
Address:		
City:	State:	Zip Code:

What kind of activities did the student get involved in with your organization?

Total number of hours attended: _____

Do you feel that the student's Community Project was beneficial to your organization?

What suggestions do you have to further improve CIEE's Community Project?

May we have your permission to use your comments in future published materials to promote the *Community Project*? (Please check) Yes No

Would you like to learn more about CIEE USA High School Programs? (Please check) Yes No

Please award (by circling) a grade on a scale of 1 to 5 on how the student performed.

Good					Poor
1	2	3	4	5	

CIEE would like to thank you once again for volunteering to supervise one of our students in the Community Project with your organization!