GFS	The Girls' Friendly Society Event Evaluation Form
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Please use CAPITAL/BLOCK LETTERS when completing this form.				
Diocese/Branch name:	Date of event: DD MM YYYY			
Diocese/Branch event & location:				
Number of girls who attended	Number of helpers who attended			
Number of leaders who attended				
Indicate the position you hold within the Diocese/Branch:				
President Secretary Treasurer	Branch Leader			
	Other:			
Name:	Address:			
Phone:				
Email Address:				

Review the outcome targets that were set while planning the event. What outcome targets were achieved as a result of this event? Was an award/certificate obtained? For example, if the event was specific training in first aid, was a first aid certificate was achieved?

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What benefits to your volunteering in GFS did this event provide?

What other activities were covered at this event?

List the opportunities for improving this event if you were to hold it again at a future date.

*** For Office Use Only ***

Date evaluation received at Oak House:DDMMYYYY