



# GIRL SCOUTS OF MICHIGAN CAPITAL COUNCIL

## ADULT MEMBER EVALUATION

Program Year \_\_\_\_\_

Service Unit \_\_\_\_\_

Please help us improve and ensure continued quality service to both girls and adults by honestly evaluating and sharing your experiences in Girl Scouts of Michigan Capital Council during this past year.

WE WANT TO KNOW WHAT WAS GOOD AS WELL AS WHAT WE NEED TO CHANGE. (Feel free to use the reverse side of this sheet to complete your answers)

**PLEASE RETURN THIS INFORMATION TO THE SERVICE CENTER, YOUR SERVICE UNIT DIRECTOR OR A MEMBERSHIP STAFF PERSON BY MAY 31.**

Thank you for all you have done this past year to bring Girl Scouting to girls!

What is your primary position in Girl Scouting?

Do you have more than one Girl Scout job? (If yes, what and why)

What made your work rewarding?

How did you receive the support you needed?

Who provided you with assistance and/or guidance in completing your work? (Please list titles)

Did you receive the training and/or materials necessary to complete your work to your satisfaction? If no, please explain.

In addition to time, what problems do you have in participating in Girl Scouting?

What can be done to make your job easier?

What was the best thing about this year?

What improvements would you like to see made?

How did you receive recognition for your work?

How do you feel appreciated for volunteering in Girl Scouts?

Additional comments: (Please feel free to use the back of the page)