



OPERATION BLESSING

Thank you for taking a minute to fill out this volunteer evaluation sheet.

Please rate your level of satisfaction on a scale of 1-5

(1 being very poor, 5 being excellent):

	1	2	3	4	5
• Registration					
○ Process before Arriving	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
○ On Site	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Facilities and Accommodations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Safety and Cleanliness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Orientation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Work Projects					
○ Were satisfying	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
○ Used your skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Overall Satisfaction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**Would you participate with
Operation Blessing again
and/or recommend us to others?**

YES

NO

In what ways did this volunteer experience enhance your life?

Suggestions on improving the volunteer experience.