



United Methodist Volunteers In Mission
Southeastern Jurisdiction Office of Coordination
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TEAM MEMBER EVALUATION

(Note: If you prefer to file this form electronically, see our web site - www.gbgm-umc.org/volunteers)

The following questions are suggested to guide you in evaluating your experience on the mission trip. Your response will be used to plan future experiences, to find out what you considered most important, and to find out where we need to work harder. Please add anything you feel was not adequately covered in these questions.

Conference	_____	Departure Date	____/____/____
District	_____	Return Date	____/____/____
Local Church	_____	Name of Team Leader:	_____
Country	_____		
Location	_____		
Project Name	_____		
Name	_____	Work Phone	(____) _____
	First Middle Last	Home Phone	(____) _____
Address	_____	FAX	(____) _____
	_____	email	_____

How were you informed of the team and how were you motivated to join?

What type of orientation did you received in the USA? By whom?

What were your personal and team objectives in coming?

Did you achieve your goals? _____ Why or why not?

Did your goals change during your stay? _____ Explain:

Were your expectations or impressions prior to arrival on site reinforced? Changed? How?

Did your work situation measure up to your expectations? _____ If not, why not?

How would you improve your work situation?

Did you find your living arrangements satisfactory?

Did you find the food generally good, adequate, poor?

What on-site orientation did you receive? In what way would you improve it?

Was there good coordination with the local personnel? If not, where did it break down?

Did you have a team spirit and a feeling of community while on the trip? If not, why not?

If given the opportunity, would you participate in such an experience again?

Additional Comments: