**Final Evaluation Form- Mentoring Circles™**

**Have you made any plans or moves towards finding volunteering opportunities or employment as a result of attending the SMART Volunteering programme?**

🗖 Yes 🗖 No

Other Comments:

**Have you taken any other actions as a result of attending the SMART Volunteering programme (e.g. read books, visited websites, made an action plan, written down goals with target dates, etc.)?**

🗖 Yes 🗖 No

Other Comments:

**B. Skills/knowledge developed (please tick relevant items and state how you developed these skills/knowledges through the SMART Volunteering programme):**

|  |  |
| --- | --- |
| **Skill/knowledge** | **How you developed this skill** |
| Self-reflection 🗖 |  |
| Goal-setting ability 🗖  |  |
| Networking skills 🗖  |  |
| Problem-solving 🗖 |  |
| Greater self-confidence 🗖  |  |
| Improved communication skills 🗖 |  |
| Higher self-motivation levels 🗖 |  |

**Would you recommend the SMART Volunteering programme to other people?**

🗖 Yes 🗖 No

Other Comments:

**Is there anything else you would have liked to have learnt during these sessions?**

🗖 Yes 🗖 No

Other Comments:

**On a scale of 1-5 (1= poor to 5=Excellent), please rate the following aspects of the project:**

1

5

2

3

4

**Circles content:**

1

5

2

3

4

**The facilitator:**

1

5

2

3

4

**Amount of sessions**

**available:**

1

5

2

3

4

**Project’s aims and**

**objectives:**

**Any other comments you would like to make about being involved in the SMART Volunteering Programme?**

Name (optional):

Date:

***\*\*\*THANK YOU!\*\*\****

Your comments may be included in future promotional/marketing material, anonymously. If you are not happy for your comments/quotes to be used for these purposes, please tick this box 🗖