



Volunteer Service Grants Host Partner Post Service Evaluation

Complete and return to:
The Rotary Foundation
1560 Sherman Ave.
Evanston, IL 60201, USA
Fax: 847-866-9759, E-mail: grants@rotary.org

Instructions

The Host Partner Rotary Club/District Contact person must complete and submit this form within two months of the project's completion.

I. Project Information

Volunteer Service Grant Number: _____ Project Location: _____

Host Partner Rotary Club: _____ District: _____

International Partner Rotary Club: _____ District: _____

Dates of Service: _____

Team Leader (Primary Project Contact): _____

Team Members: 1. _____ 2. _____

3. _____ 4. _____

Describe the service that was provided and/or the planning activities that were completed.

II. Rotarian Involvement

How many Rotarians from the Host Partner Club participated in the project? _____

How did Rotarians from the Host Partner Club participate in the project?

III. Project Sustainability – Please complete the appropriate section. Select all that apply

Direct Service Grants

- The project is continuing to function without Foundation funds.
- If training was a component of the project, trainees are using their knowledge and skills.
- This project has provided community members with the skills, knowledge, or institutions that will allow them to help themselves.
- The community has initiated additional projects related to the same or similar problems.
- The project has not been sustainable.

Planning Mission Grants

- The project is being designed to continue functioning without Foundation funds.
- If training will be a component of the project, plans are being made to ensure that trainees will use their knowledge and skills.
- This project intends to provide community members with the skills, knowledge, or institutions that will allow them to help themselves.
- As a result of the planned project, the community will have the ability & knowledge to initiate more projects related to the same or similar problems.
- The project is not designed to be sustainable.

IV. Rotary Impact – Please select all that apply

- Our club/district's international Rotary connections are stronger because of this project.
- Club membership has increased because of this project.
- Visibility of Rotary in our community has increased.
- Our club's awareness of the needs in our community has increased.
- Volunteer activity in our club or district has expanded.
- Our club/district has become more active in pursuing Foundation grants and Rotary programs.
- Awareness of the needs in our community has been raised among Rotarians in other countries.
- Participation in this Volunteer Service Grant has not changed our club or district in a significant way.

V. Post Service Evaluation

- We believe the volunteer(s) performed exemplary service in a manner befitting Rotarians.
- We would invite the volunteer(s) to return to our community.
- We did not have sufficient knowledge of, or interaction with, the volunteer(s) to evaluate their service.
- We cannot endorse the volunteer's service.
- We would not invite the volunteer(s) to return to our community.

Additional comments regarding the volunteer(s) service:

VI. Authorizing Signature

Signature of Host Project Contact: _____ Date: _____
Print Name: _____ Rotary Club: _____
Rotary Title: _____

If your project clearly demonstrates active Rotarian involvement and is worthy of publication, please complete an RI Newstip Form, available on the RI Web site at http://www.rotary.org/newsroom/downloadcenter/pdfs/mg_newstip.pdf.