

We value your partnership with the Singapore youth. Thank you for the opportunity to serve and learn from your people. Your feedback as a host partner/community will help us evaluate
and improve the effectiveness of our YEP programme.

|  |
| --- |
| YEP Project Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name & Designation of person completing the evaluation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |

Signature & Stamp of Host Organisation

Date



Rating on a scale of 1 to 5 (please circle your choice)

1

Strongly Disagree

2

Disagree

3

Neutral

4

Agree

5

Strongly Agree

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| SD | D | N | A | SA |
| 1 | 2 | 3 | 4 | 5 |

 1. The project was helpful to my organisation/community(ies).
Please elaborate.



2. Were youth from your community/organisation involved
in the project? If ‘No’, proceed to Q3. If ‘Yes’, proceed to Q2a.

Yes

No



|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| SD | D | N | A | SA |
| 1 | 2 | 3 | 4 | 5 |

 2a. The experiences were helpful in developing our youth.
 Please elaborate.



|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| SD | D | N | A | SA |
| 1 | 2 | 3 | 4 | 5 |

3. Please provide feedback/suggestions for improvements
(if any) for the following:

 

The project duration is sufficient.



The size of the YEP team was manageable for your

organisation/community to host.



Other comments/suggestions/feedback
for improvements?



4. What would be a good follow-up for this project?



|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| SD | D | N | A | SA |
| 1 | 2 | 3 | 4 | 5 |

5. For Overseas Host: Your community and you have learnt
much about Singapore and its youth. Please elaborate.



Thank you for your time!