DE LA SALLE SANTIAGO ZOBEL SCHOOL

STUDENT CLUBS AND ACTIVITIES OFFICE

**ON AND OFF-CAMPUS ACTIVITY EVALUATION FORM**

**(Seminar/ Forum/ Symposium)**

**Department/ Organization/Club:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date and Time of Activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Nature/ Title of Activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Venue: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address of Venue: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of the Adult Leader/Person-in-Charge/ Participant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Number of Participants Who Attended the Activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

5- Excellent 4 –Very Good 3- Good 2 – Fair 1 – Poor

N/A if the item is not applicable

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **A. FACILITIES** | **5** | **4** | **3** | **2** | **1** | **n/a** |
| 1. Location |  |  |  |  |  |  |
| 2. Set- up and logistics |  |  |  |  |  |  |
| **B. PROGRAM DESIGN** |  |  |  |  |  |  |
| 1. Meeting program goals/objectives |  |  |  |  |  |  |
| 2. Methodologies used |  |  |  |  |  |  |
| **C. STUDENT PARTICIPATION** |  |  |  |  |  |  |
| 1. Involvement in activities |  |  |  |  |  |  |
| 2. Defined leadership functions |  |  |  |  |  |  |
| **D. SPEAKER/ FACILITATOR/ ORGANIZERS** |  |  |  |  |  |  |
| 1. Rapport with participants |  |  |  |  |  |  |
| 2. Balance between theory and practice |  |  |  |  |  |  |
| 3. Mastery of subject matter/ activity |  |  |  |  |  |  |
| **E. ASSISTANCE OF DLSZ ADULT LEADER/PERSONNEL**  |  |  |  |  |  |  |
| **E. SCHEDULE** |  |  |  |  |  |  |
| **F. DURATION OF THE ACTIVITY** |  |  |  |  |  |  |
| **G. GENERAL RATING OF THE ACTIVITY** |  |  |  |  |  |  |

II. Critical incidents / problems encountered:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

III. Actions taken by the DLSZ Adult Leader/Person-in-charge of the Activity:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IV. Other comments and recommendations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

V. Insights/ Reflections (Use the back part of this paper.)

**Please return this form to the Student Clubs and Activities Office.** Ref:*http://www.dlsu.edu.ph/offices/osa/student\_life/pdf/slife\_off-campusreport.pdf*