

## 4-H Teen Leadership Project Evaluation

Title of Leadership Project \_\_\_\_\_

Type of Activity (*check one*): Club    County    Community    State    Other

When was the project done (date(s), time(s))? \_\_\_\_\_

Where was the activity held? \_\_\_\_\_

Who/What was the activity for? \_\_\_\_\_

Other teen/adult leaders involved \_\_\_\_\_

Purpose of activity \_\_\_\_\_

Resources Used (people/materials) \_\_\_\_\_

What happened as a result of the activity (outcome)? \_\_\_\_\_

Evaluate the activity. Was it successful? Why or why not? Would you change anything?

What did you learn as a result of this activity?

Activity Advisor=s Evaluation: \_\_\_\_\_

Advisor/Leader Signature \_\_\_\_\_ Date \_\_\_\_\_

*\*Adapted from ATeens Take the Lead, @ West Virginia University Extension Service*