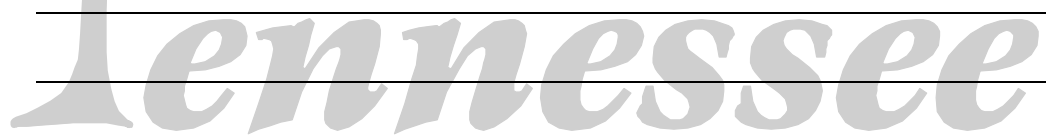


TENNESSEE MASTER GARDENER VOLUNTEER PROJECT EVALUATION

Project name: _____

Description: _____



Starting date: _____ Duration: _____



Average attendance on workdays: _____ Cost of project to Master Gardeners: _____

Source of funding: _____

Special tools and equipment needed: _____

1. Please describe the joys of this year's work on your project:

2. Describe any problems or frustrations you had and possible solutions with your host organization:

3. With your committee members, do you have enough volunteers, too many, no-shows?

4. Suggestions or recommendations for next year:

5. Would you be willing to serve as chair next year?

6. What impact has this project had on you and the community?
