MINISTRY OR PROGRAM



EVALUATION

	EVALUATIUN
MINISTRY OR PROGRAM NAME	
PERSON IN CHARGE	TODAY'S DATE
CECTION 4 CTATICTION	

SECTION 1: STATISTICS

Enrollment	Allocated Budget	
Average Attendance	Other Metric	
Volunteers	Other Metric	

SECTION 2: SCORECARD [1 is lowest, 10 is highest] How well does this ministry or program reflect Church Core Value #1? How well does this ministry or program reflect Church Core Value #2? How well does this ministry or program reflect Church Core Value #3? How well does this ministry or program reflect Church Core Value #4? How well does this ministry or program reflect Church Core Value #5? How effective is this program or ministry at helping us accomplish our stated mission?

MINISTRY OR PROGRAM



EVALUATION

SECTION 3: QUESTIONS What are the strengths of this program or ministry? What are the weaknesses of this program or ministry? What improvements should be made to this program or ministry? If we were not already doing this ministry or program, would we start it? Why or why not? Overall, this ministry or program is . . . Outstanding Satisfactory Great Needs Improvement Unsatisfactory **TODAY'S DATE EVALUATOR'S NAME**