

Leadership Evaluation Form



Print and copy this form and ask 3 members of the group to do an evaluation of your leadership. Collect the forms and send to the address at the bottom.

Name of leader _____

Date _____ Grade(s) of Youth in the group _____

Church or Group _____

What kind of Class or Group was this (check one):

- Sunday School class Discipleship Group Youth Choir
 Weekday Bible study group Campus Christian Club
 Other _____

1. How many youth were in the group? Were they all boys, all girls, or mixed group?
2. What kinds of learning methods were used (i.e., lecture, role play, "buzz" groups, etc.)?
3. How was the Bible used in the session?
4. (For Youth Choir) What was the sequence of activities in the rehearsal?
5. How did the leader relate to the youth?
6. What worked best in the session?
7. What would you recommend to be done differently?

Signature _____ Grade _____

*Complete this form and mail to SLTN, PMB 164, 3501 Sycamore School Road #125, Forth Worth, TX 76133
Or, fax to 817-263-0875*