



EVALUATION

MINISTRY OR PROGRAM NAME

PERSON IN CHARGE

TODAY'SDATE

SECTION 1: STATISTICS

Enrollment	Allocated Budget	
Average Attendance	Advertising	
Volunteers	Number of Volunteer hours	

SECTION 2: SCORECARD

(1 is lowest, 10 is highest)

Church's Mission Statement to Long Term Plan (LTP)

SCORE

How well does this ministry or program reflect LTP Values?

How well does this ministry or program reflect LTP Goals?

How well does this ministry or program reflect LTP Strategy?

How well does this ministry or program utilize Advertising?



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

Great

Satisfactory

Nee

Needs Improvement

Unsatisfactory

EVALUATOR'S NAME