



MONTANA CONSERVATION CORPS
Project Partner Evaluation of Project



** This form should be submitted upon completion of the project **

CREW LEADERS PLEASE COMPLETE THIS SECTION:

Date

Project Name

Project Code

Project Partner Agency

Community(s) Served

County(s) Served

MCC Crew Leader Names

Project Type (please check ONE):

Trails

Habitat, Parks & Public Lands

Community Structures

PROJECT PARTNER - PLEASE COMPLETE THIS SECTION:

Your feedback helps MCC improve our services and accurately report data on our AmeriCorps grant.

1) Please rate the following (check one)	Poor		Good		Outstanding
The quality of the work performed	1	2	3	4	5
The crew's work ethic/productivity	1	2	3	4	5
The crew leaders' competency and effectiveness	1	2	3	4	5
The quality of service provided by regional supervisor/MCC staff	1	2	3	4	5
2) Please rate overall project results, as described below:	1	2	3	4	5

Trails: Improvement of condition of trail for public access and safety and resource protection.

or

Habitat, Parks, Public & Tribal Lands: Improvement of habitat conditions in parks and other public or tribal lands

or

Community Structures: Improvement of conditions of weatherized homes or community structures

3) Is it likely you would use the services of MCC on a future project? Yes No

If not, please share why you would not use the MCC again

4) Please add any additional comments, or share suggestions to improve the crew's performance:

Project Agency Name

Completed By **Printed** **Signature** **Date**

Please return form to appropriate Regional Supervisor or call our state office at 406-587-4475 with additional questions.

Chris Nessel 2310 N 7 th Ave, Unit D Bozeman, MT 59715 (406) 587-2606 (fax) chris@mtcorps.org	Cliff Kipp 1203 Highway 2 West #27 Kalispell, MT 59901 (406) 587-2606 (fax) clifford@mtcorps.org	Bobby Grillo 508 Toole Ave Missoula, MT 59802 (406) 587-2606 (fax) bgrillo@mtcorps.org	Adam Hein 1229 E Lyndale Helena, MT 59601 (406) 587-2606 (fax) adam@mtcorps.org
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