COMMUNITY SERVICE
STUDENT EVALUATION OF LOBBY or CAMPAIGN TRIP/PROJECT

Student Name _____Current Form _____ Today's Date _____

Student email_____ Advisor_____

Date of Trip/s: From _____ To_____

Name of Primary Teacher/Supervisor _____

Supervisor_____ Title _____ Phone _____

Email _____ Address _____

1. **What was purpose of the trip/project and what social issue were you addressing? (e.g., lobbying to promote the healthcare bill or campaigning to re-elect a candidate.)**

2. **Please list name/s and title/s of staffers, legislators, constituents, journalists and others you met on the trip/project.**

3. **Did you receive specific information and/or training in preparation for the trip/project? If yes, please specify.**

4. **How did you prepare for the trip/project?**

5. **Were you assigned to a specific teacher/group leader for supervision? Please list name/s.**

6. **What was your role during the trip/project?**

7. **Did you have expectations and assumptions before the trip/project that changed as a result of your experience on the trip/project? If yes, explain.**

8. **Would you recommend this trip/project be repeated? Would you recommend that the trip/project be done differently next time? If yes, suggest specific changes.**

9. **Are there any issues you would like the Community Service Director to discuss with your teacher/supervisor? If yes, please explain.**