Performance Evaluation of Volunteer

Volunteer_____Position _____

Period covered by evaluation_____Date of Evaluation _____

Position Duties and Responsibilities:	***Not Met***	***Satisfactory***	***Superior***
1. _____	1	2	3
2. _____	1	2	3
3. _____	1	2	3
4. _____	1	2	3
5. _____	1	2	3

Work Relationships:	***Needs Improvement***	***Satisfactory***	***Superior***
1. Relations with other volunteers	1	2	3
2. Relations with staff	1	2	3
3. Relations with service recipients	1	2	3
4. Meeting commitments on time	1	2	3
5. Initiative	1	2	3
6. Flexibility	1	2	3

Comments by supervisor regarding above areas:

Comments by volunteer regarding above areas:

Overall, how does the volunteer feel about this position?

What else can be done to support the volunteer in this position or to move the volunteer to a new position?

_____ _____ _____ _____

Supervisor *Date* *Volunteer (optional)* *Date*

Scheduled date of next evaluation _____

Source: From NC Handbook of Volunteer Management, 1991. As printed in North Carolina Respite Care Coalition, *Lifespan Respite: An Information Guide for Developing, Recruiting, Training and Retaining Volunteers*, 2011