Activity Evaluation Cover Sheet



		T			
Partnerships Manager					
Email					
Phone number					
Date of activity					
State					
Venue					
Event Name e.g. SKM Uncovered					
Activity type (please tick one): Business blackboard Site visit Speed careering School visit/presentation Mock interview Work experience (Please note – Business Events, Charter Signature)		gnings and the BSA program are	Prepare for work Mentoring BBQ with the boys Polish Lunch with the girls Teacher Professional Devel		ess)
(Freuze Hote Dusiness Events) charter signings and the 25% program are not mediated in the receive, Evaluation process,					
Please tick if the activity is part of the Real Futures Generation project:			ect:	RFG?	
Name of School(s)					
Year level(s) involved					
Number of students					
Number of teachers					
Major Partner or Supporter		Names of volunteers who at	tended (separate with com	mas)	
(if applicable)		(Please add extra rows as needed)			
(
Local or State Volunteering		Names of volunteers who attended (separate with commas)			
Provider(s)		(Please add extra rows as needed)			
1 Tovider(3)		(Freuse add extra 1943 as the			
				_	
Method surveys and feedback forms are being provided: ☐ Hard copy (post) ☐ Scanned (email) ☐ Online (Survey Monkey) ☐ Other (e.g. SharePoint)					
Please send this cover sheet, along with the relevant completed Activity Evaluation Surveys, to Beacon Head Office.					
	s@beaconfoundation.r	<u>net</u>	Please remember to scan a first (using 'dark' settings).	nd save the fo	orms
ATTN: Ev Level 1, 4	oundation aluation Team 0 Molle Street asmania 7000 Australia		Once complete, the relevar emailed to the Partnership above.		