Community Partner Feedback Form

INSTRUCTIONS: Please fill out this form including your name, position, and organization. Click the Submit button below when you're finished.

Name and Organization
Fields marked with '*' are required

*First Name: ________________________________
*Last Name: ________________________________
Position: __________________________________
*Organization: ______________________________

First We would like some information about your organization.

Is your organization:
☐ For Profit  ☐ Nonprofit

What are the benchmark areas addressed by your organization? Please check all that apply.
☐ Addiction
☐ Animals
☐ Crisis response and assistance
☐ Cultural awareness
☐ Disabilities and or disease
☐ Domestic violence
☐ Education/literacy
☐ Environmental issues
☐ Family asset building
☐ Health care
☐ Homelessness
☐ Incarcerated youth and adults
☐ Low-income assistance
☐ Mental health
☐ Parks and gardens
☐ Refugee assistance
Senior citizens
Visual and performing arts
Vulnerable youth
Youth asset building
Other (please specify)

Which age population do you **primarily** serve?

Children

Which race/ethnic population do you **primarily** serve?

African American / Black American / Black

How would you describe the socio-economic status of the majority of the clients you serve?

Poverty

The population you serve is:

Rural

The next set of questions relates to your organization's most recent experiences with Weber State University.

What is your motivation for working with Weber State University?

Increase capacity of my organization through student involvement

How long has your organization been working with Weber State University?

Less than 1 year

How did your interactions with Weber State influence your capacity to fulfill the mission of your organization?

*Please check all that apply.*

- New insights about the organization/its operation
- Change in organizational direction
- Increase in number of clients served
Increase in number of new services offered
Enhancement of existing services
No influence
Increased leverage of financial/other resources
New connections/networks with other community groups

Other influences (please specify)

What are some of the challenges you encountered? Please check all that apply.

- Demands upon staff time
- Project time period insufficient
- Students not well prepared
- Students did not perform as expected
- Number of students inappropriate for size of organization
- Mismatch between course goals and organization
- Little contact/interaction with faculty
- Insufficient number of service hours required in course to benefit the organization
- Confusion about the intended student learning goals
- Not Applicable
- No challenges encountered

Other (please specify)

What were some of the economic effects of your work with the university/college? Please check all that apply.

- Increased value of services
- Increased funding opportunities
- Increased organizational resources
- Identification of new staff
- Completion of projects
- Identification of additional volunteers
- Access to university technology and expertise
- No economic effects
☐ New products, services, materials generated

Other influences (please specify)

Are students serving your organization through part of a course requirement? (e.g. a community-based or service-learning class)

Yes

With how many faculty members is your organization partnering?

1

In what ways do you believe that you are able to influence the university as a result of your connection with one (or more) of its courses? Please check all that apply.

☐ Influence on course content

☐ Influence on faculty awareness of community

☐ Influence on university policies

☐ No influence

☐ Influence on student learning experience

Other influences (please specify)

As a result of your connection to this (these) university/college course(s), how has your awareness of the university changed? Please check all that apply.

☐ I learned more about university programs & services.

☐ I know who to call upon for information and assistance.

☐ I am more involved with activities on campus.

☐ I have an increased knowledge of university resources.

☐ I have more interaction with students.

☐ I have more interaction with faculty.

☐ I have more interaction with university administrators.

☐ I have taken or plan to take classes at the university.

☐ My awareness of the university has not changed.

Other (please specify)
Please rate your level of satisfaction with your connection to the university course(s) in the following areas.

<table>
<thead>
<tr>
<th></th>
<th>Very Satisfied</th>
<th>Satisfied</th>
<th>Neutral</th>
<th>Dissatisfied</th>
<th>Very Dissatisfied</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level and quality of interaction with students.</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
</tr>
<tr>
<td>Level and quality of interaction with faculty.</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
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<tr>
<td>Quality of student work.</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
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<tr>
<td>Feedback and input into planning of experiences.</td>
<td>○</td>
<td>○</td>
<td>○</td>
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<td>Scope and timing of activity.</td>
<td>○</td>
<td>○</td>
<td>○</td>
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<tr>
<td>Level of trust with students.</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
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<tr>
<td>Level of trust with faculty.</td>
<td>○</td>
<td>○</td>
<td>○</td>
<td>○</td>
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</tr>
</tbody>
</table>

How did you handle the logistics of your community-based learning course(s)?

*Please select the MOST accurate response.*

- I made the arrangements and student placements

The last set of questions relates to your overall evaluation of the service experiences of WSU students.

On a scale of 1 to 5 (1 being Low and 5 being High), rate the degree to which the students serving in your organization met your expectations.

What do you wish students had known or been aware of before serving in your organization? Please describe:
What was the best aspect of this experience for your organization?

Do you plan to continue working with WSU in this or another activity?

Yes

Please add any additional comments.