

# Evaluation Form

## Guest at Your Table

2010–2011  
Celebrate 70  
years of UU  
faith in action

Please help us improve this program by completing this form and returning it to UUSC within 60 days of completing your Guest program. If necessary, use a separate sheet for your answers.

1. Did your congregation:

- |   |                              |                             |
|---|------------------------------|-----------------------------|
| Publicize your program in advance?  | <input type="checkbox"/> yes | no <input type="checkbox"/> |
| Devote all or part of an intergenerational service to Guest at Your Table?  | <input type="checkbox"/> yes | no <input type="checkbox"/> |
| Include Guest at Your Table activities in children's religious education classes?   | <input type="checkbox"/> yes | no <input type="checkbox"/> |
| Have a special gathering to collect the boxes?  | <input type="checkbox"/> yes | no <input type="checkbox"/> |
| Use UUSC member stickers?   | <input type="checkbox"/> yes | no <input type="checkbox"/> |
| Provide UUSC with tally sheets of your congregation's Guest at Your Table participants, including their addresses and the amounts they contributed? | <input type="checkbox"/> yes | no <input type="checkbox"/> |
- If not, please share the reason here:*

2. Which of the following items did you use in conducting a Guest at Your Table program this year? (Check all that apply.)

- |  |  |
|--|--|
| <input type="checkbox"/> Guest at Your Table boxes       | <input type="checkbox"/> Order-of-service inserts              |
| <input type="checkbox"/> <i>Stories of Hope</i> booklets | <input type="checkbox"/> Guest at Your Table Planning Guide    |
| <input type="checkbox"/> Guest at Your Table poster      | <input type="checkbox"/> Donation envelopes (instead of boxes) |
| <input type="checkbox"/> Religious Education Kit         | <input type="checkbox"/> Additional online resources           |
| <input type="checkbox"/> Sample Worship Service          | (please specify): _____  |
| <input type="checkbox"/> Order-of-service covers         | <input type="checkbox"/> Other (please specify): _____         |



## Did you know?

UUSC staff carefully read each evaluation form and use your input to improve next year's program! Thank you for sharing your valuable feedback.

3. Which items did you find most helpful? Why?

4. This year *Stories of Hope* is again offered in booklet form, written for different age groups. Was this helpful? How could we continue to improve this resource?

5. What percentage of congregants who participated in or gave to Guest at Your Table do not have children in their homes?

6. What other suggestions do you have for improving the materials or the program?

7. Did you hold an event or other special activity that personalized your program or made it more successful than in previous years? Please tell us about it so that we can share it with other congregations.

8. Please share any other comments you may have about the Guest at Your Table program and this year's materials.

**I would like to help save paper and UUSC resources!** I am opting out of receiving the reminder postcard by mail next year and will access all of the resources I need online, instead. I understand that I will receive an e-mail informing me when resources are available.

Your name \_\_\_\_\_ Phone \_\_\_\_\_

Church \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

E-mail address \_\_\_\_\_

Position:     UUSC Local Representative     Minister     Religious Educator  
 Guest at Your Table Coordinator  
 Other (please specify) \_\_\_\_\_

Please mail this evaluation form to: UUSC – Guest at Your Table, 689 Massachusetts Avenue, Cambridge, MA 02139.  
You may also provide feedback online at [www.uusc.org/guest/evaluation](http://www.uusc.org/guest/evaluation). Thank you!