



Job's for Montana's Graduates Foundation AmeriCorps Program

Community Volunteer Survey

Directions: Please complete this survey and return it to the JMGF AmeriCorps Member who gave it to you *or* mail it to the JMGF AmeriCorps office at 931 N. Last Chance Gulch Ste. 2 Helena, MT 59601. Thank you!

Volunteer Name: _____

Address: _____

Name of the AmeriCorps Member who recruited you: _____

Where did you volunteer and for how long (*approximately how many hours*):

Please briefly describe the volunteer service you provided: _____

How would you characterize your volunteer experience? Positive Negative

Would you volunteer again? Yes I could be talked into it Not Sure No

As a result of my experience volunteering, I believe the most important way for a person to be actively involved in their community is to: _____

As a result of volunteering, I will be more actively engaged in my community;

Strongly Agree Agree Disagree Strongly Disagree

As a result of volunteering, my view of the importance of people becoming actively involved in their communities has strengthened.

Strongly Agree Agree Disagree Strongly Disagree

In the future, are you willing to be contacted by the Governors Office on Community Service regarding your volunteer experience? Yes; Telephone Number: _____ No

Would you be interested in serving as an AmeriCorps Member, with JMGF or another program?

Yes, with JMGF Yes; another program Not Sure No Already Alumni

Signature: _____

Date: _____

Thank you so much for volunteering and for completing this survey!