



## Make A Difference Grant Post-Survey 2021-22

First & Last Name: \_\_\_\_\_

Project Title: \_\_\_\_\_

School: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Gender:  Male  Female  Other Gender \_\_\_\_\_

Which of the following best describes how often you are involved in community service activities? (Please check one box for your answer.)

- |   |   |
|---|---|
| <input type="checkbox"/> Never              | <input type="checkbox"/> Once a month         |
| <input type="checkbox"/> Once a year        | <input type="checkbox"/> A few times a month  |
| <input type="checkbox"/> A few times a year | <input type="checkbox"/> At least once a week |

Please give your opinions on the following statements...	Strongly Agree	Agree	In the middle	Disagree	Strongly Disagree
I learned a lot through this project.					
I can help solve the problems in my community.					
I like volunteering to help others.					
I can help change my community in a positive way.					
This project has had an impact on me.					

Please answer the questions below. Use the back of the survey for more space, if needed.

1. What part of the service project had the most influence on you?
  
  
  
2. What lessons did you learn while taking part in your service project?
  
  
  
3. Has this service project made you want to volunteer in the future? Explain.