NONPROFIT EVALUATION FORM  
MTAP Program 

Office for Business & Community Economic Development 
University of Minnesota 

Date: ................................................

Type of Project: MTAP

Name & Title: ........................................................................................................

Nonprofit Organization: ........................................................................................

1. Please rate the following statements about the students: 
   (1 – strongly disagree, 3 – neutral, 5 – strongly agree) 

   The students were on time for all meetings. ......................................................... 1 2 3 4 5
   The students communicated their progress on the project regularly. .................. 1 2 3 4 5
   The students were respectful of my time. .............................................................. 1 2 3 4 5
   The students were knowledgeable and competent in completing the project. .... 1 2 3 4 5

2. Please rate the following statements about the project outcome: 
   (1 – strongly disagree, 3 – neutral, 5 – strongly agree) 

   The final report met my expectations. ................................................................. 1 2 3 4 5
   The final report has provided me with great insights. ........................................... 1 2 3 4 5
   The final report will be useful to my organization. .............................................. 1 2 3 4 5
   The student recommendations will help my organization run more efficiently. ... 1 2 3 4 5
   The student recommendations will help me identify my clientele and stakeholders better. 1 2 3 4 5
   The student recommendations will help me provide services that are more effective. ... 1 2 3 4 5
   The student recommendations will help me build capacity within my organization. 1 2 3 4 5
3. How do you plan to use the final report?

4. How many times did you e-mail, talk or meet with the students? ________________

5. Was this time sufficient for you to share enough information about your organization?  
   Yes     No

6. Would you recommend this program to other nonprofit organizations?  Yes     No  
   Why or why not?

7. What recommendations do you have for the program?

8. What recommendations do you have for students who participate in the program?

9. What recommendations do you have for other nonprofit organizations who participate in the program?

Thank you for completing the evaluation form!

Please return to: Nedy Windham  
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