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| **C:\Users\waley\Desktop\new bsu logo copy.gif** | | Reference No.: BatStateU-FO-OSAS-01 | | | | | Effectivity Date: January 3, 2017 | | | | Revision No.: 00 | |
| |  | | --- | | Republic of the Philippines | | | | | | | | | | | | | |
| **BATANGAS STATE UNIVERSITY** | | | | | | | | | | | | |
| ­­­ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Campus | | | | | | | | | | | |  |
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| OFFICE OF STUDENT AFFAIRS AND SERVICES | | | | | | | | | | | | |
|  |  | |  |  |  |  | |  |  |  |  |  |
| **ACTIVITY EVALUATION SHEET** | | | | | | | | | | | | |
|  |  | |  |  |  |  | |  |  |  |  |  |
| Name of Organization / Organizer: | | | | | | | | | | | | |
| Title of the Activity: | | | | | | | | | | | | |
|  |  | |  |  |  |  | |  |  |  |  |  |
| Please rate the activity as it appeared to you in relation to the 5-point scale shown below. Encircle the | | | | | | | | | | | | |
| number which corresponds to your evaluation. Your honest assessment will help us improve future activities. The | | | | | | | | | | | | |
| highest possible rating for any item is 5 and the lowest is 1. Please write N/A if not applicable. | | | | | | | | | | | | |
|  |  | |  |  |  |  | |  |  |  |  |  |
| Indicators: | | | 5 - Outstanding | |  | 2 - Unsatisfactory | | | |  |  |  |
|  |  | | 4 - Very Satisfactory | | | 1 - Poor | | | |  |  |  |
|  |  | | 3 - Satisfactory | |  |  | |  |  |  |  |  |
|  |  | |  |  |  |  | |  |  |  |  |  |
| **INDICATORS** | | | | | | | | **O** | **VS** | **S** | **US** | **P** |
| 1. Registration (system and procedure, organization | | | | | | | | 5 | 4 | 3 | 2 | 1 |
| and orderliness, services of the committee) | | | | | |  | |  |  |  |  |  |
| 2. Objectives of the activity were achieved | | | | | |  | | 5 | 4 | 3 | 2 | 1 |
| 3. Level of Interest of the Participants | | | | |  |  | |  |  |  |  |  |
| a. Punctuality/attendance | | | | |  |  | | 5 | 4 | 3 | 2 | 1 |
| b. Participation of the participants during  session | | | | | | | | 5 | 4 | 3 | 2 | 1 |
| 4. Relevance of the activity to the University’s vision, mission and objectives | | | | | | | | 5 | 4 | 3 | 2 | 1 |
| 5. Time allotment for the activity | | | | |  |  | | 5 | 4 | 3 | 2 | 1 |
| 6. Methods and Procedure of the Activity | | | | | |  | | 5 | 4 | 3 | 2 | 1 |
| (Orderliness and sequencing of the activities) | | | | | |  | |  |  |  |  |  |
| 7. Venue (facilities, equipment, multimedia etc.) | | | | | |  | | 5 | 4 | 3 | 2 | 1 |
| 8. General rating of the Activity Conducted | | | | | |  | | 5 | 4 | 3 | 2 | 1 |
| 9. Speaker/Facilitator | | | | | |  | |  |  |  |  |  |
| 1. Speaker/Facilitator 1 | | | | | |  | | 5 | 4 | 3 | 2 | 1 |
| 1. Speaker/Facilitator 2 | | | | | |  | | 5 | 4 | 3 | 2 | 1 |
| 1. Others, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | 5 | 4 | 3 | 2 | 1 |
| 10. Organizer | | | | | |  | |  |  |  |  |  |
| a. Courtesy | | | | | |  | | 5 | 4 | 3 | 2 | 1 |
| b. Promptness | | | | | |  | | 5 | 4 | 3 | 2 | 1 |
|  |  | |  |  |  |  | |  |  |  |  |  |
|  |  | |  |  |  |  | |  |  |  |  |  |
| Comments on the Activity Conducted | | | | |  |  | |  |  |  |  |  |
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| Suggestions: | | |  |  |  |  | |  |  |  |  |  |
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| Name/Signature: (Optional) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | |
|  |  | |  |  |  |  | |  |  |  |  |  |