

**To be completed by the ND Parks & Recreation Department (NDPRD) Staff**

Host Name(s)	State Park	Session Dates	Year
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<b>The Campground Hosts:</b>	<b>Strongly Agree</b>	<b>Agree</b>	<b>Neutral</b>	<b>Disagree</b>	<b>Strongly Disagree</b>
have fulfilled the basic work agreement.					
were available during agreed upon hours and days.					
notified park staff when they would not be available.					
related well to park staff.					
were willing to give extra assistance when needed.					
were informative and helpful to other campers.					
offered ideas and suggestions to improve the program.					
represented department well.					
would be recommended for a similar position elsewhere.					

Comments (write additional comments on back, if necessary)

Evaluator's Signature

Date