

	Reference No.: BatStateU-REC-ESO-03	Effectivity Date: January 3, 2017	Revision No.: 00
Title:	EXTENSION PROJECT / ACTIVITY EVALUATION REPORT		
Title of the Project or Activity:			
Location:			
Date of Implementation:			
Implementing College / Office:			
Partner Agency:			
Nature of Extension Service:			
Number and Type of Beneficiaries (<i>Type such as OSY, Children, Women, etc. </i>):			
Faculty Members Involved: (<i>Project Leader/Coordinators</i>)			
Objectives:			
Short Narrative of the Activity:			
<p>Evaluation Result (<i>if activity is training, technical advice or seminar</i>)</p> <ol style="list-style-type: none"> 1. Number of beneficiaries/participants who rated the activity as: <ol style="list-style-type: none"> 1.1. Very good _____ 1.2. Good _____ 1.3. Fair _____ 1.4. Poor _____ 2. Number of beneficiaries/participants who rated the timeliness of the activity as: <ol style="list-style-type: none"> 2.1. Very good _____ 2.2. Good _____ 2.3. Fair _____ 2.4. Poor _____ 			

Photos (*Please attach photos with caption*):

Prepared by: NAME OF EXTENSION COORDINATOR/HEAD Designation Date Signed:	Reviewed by: NAME Director, Extension Services Date Signed:
Approved: NAME Vice President for Research, Development and Extension Services Date Signed:	Remarks:

cc: (1) Office of the Executive Director; (2) College Dean