

Girl Outcome Evaluation Form

Name _____ Age _____

Address _____

Email _____ How long have you been in this program? _____

Name of School or Event _____ Date _____

Please respond to the following statements by circling 5 if you 'strongly agree', 4 if you 'agree' 3 if you 'neither agree nor disagree', 2 if you 'disagree', or 1 if you 'strongly disagree'. Please circle only one answer per statement:

Question	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
I feel good about myself.	5	4	3	2	1
I am more likely to go with the crowd even if I think it is wrong.	5	4	3	2	1
I am likely to try things I have never done before.	5	4	3	2	1
I try to solve problems for myself before asking for help.	5	4	3	2	1
I am willing to change my mind if I learn new information.	5	4	3	2	1
If something is hard, I am more likely to give up after only a couple tries.	5	4	3	2	1
I feel a part of a community of people at school.	5	4	3	2	1
When there is conflict, I often run away from it or ignore it.	5	4	3	2	1
I like working with other people to solve problems.	5	4	3	2	1
I have friends who are different from myself.	5	4	3	2	1
I enjoy listening to different points of view.	5	4	3	2	1
I like to take the lead on projects.	5	4	3	2	1
I enjoy planning activities.	5	4	3	2	1
When working with others, I am more likely to speak up and share my ideas than sit back and let others lead.	5	4	3	2	1
I am likely to share things I learn with others.	5	4	3	2	1
I don't think much about other people's needs, only my own.	5	4	3	2	1
I don't plan on going to college after high school.	5	4	3	2	1