

MINNESOTA WOMEN OF TODAY
STATE PROGRAM MANAGER VISIT REPORT

Send one (1) copy to the state president and to either the external or internal vice president immediately following the visitation.

Name _____ Programming Area _____

Name of Chapter or District Number _____ Mileage (one way) _____

Date of Meeting _____ Place _____

Number of Members in Attendance _____ Guests _____

How far in advance were you contacted to be a speaker?

Which facet of your project area were you asked to talk about?

YES NO

___ ___ Were you welcomed and introduced?

___ ___ Were the members aware of this area before your presentation?

___ ___ Are they presently doing or planning to do a project in this area?

___ ___ Did you use audio-visual equipment and materials?

___ ___ Did you hand out materials (pamphlets, etc.)?

___ ___ Were you paid for your mileage?

___ ___ Did you incur any other expenses?

___ ___ If so, were they paid?

___ ___ Did your chapter provide you with traveling companions?

COMMENTS: Generally, explain how you feel about this visitation. Evaluation of yourself, your effectiveness and the response of those present.

CHAPTER CONTACT PERSON _____

ADDRESS _____

_____ PHONE NUMBER (____) _____