
Directions: To help the Commission improve the effectiveness of its members and its operations, please take the needed time to complete this evaluation and provide it to the designated Commission Committee, Subcommittee, Panel and Task Force Chair and keep a copy for the Commission files.

Name of Chair _____

Name of Evaluator _____ Date of Evaluation _____

Based on your knowledge of the performance of the above named Chair over the past year and the results of the evaluation completed by the designated Chair group members, please rate the effectiveness of the following items from 1 to 5, with 5 being very effective to 1 being very ineffective. If

meetings compete.