

# Volunteer Feedback Survey

Name

Email

Volunteer Role/Position

Event/Project (if applicable)

## 1. Overall Experience

- ☐ 1  
☐ 2  
☐ 3  
☐ 4  
☐ 5

2. What did you enjoy most about volunteering?

3. What challenges did you face?

4. Did you feel supported by the organization?

5. Was the training/instructions adequate?

6. Suggestions for improvement

Additional Comments

