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| WYDAN NIGHT SHELTER  VOLUNTEER FEEDBACK FORM | |
| This is an opportunity for you to record any comments, questions or reflections you wish to make, for us to consider when we are planning the continuation of the WYDAN NIGHT SHELTER. Feel free to answer as many or few questions as you would like! Thank you for your time…. | |
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| 1 Your role/roles in the night shelter: | |
| 2 How you felt about taking part beforehand: | |
| 3 What your experience was like in reality: | |
| 4 Did you attend any training beforehand? If so, was the training suitable or helpful? | |
| 5 Had you had previous experience of volunteering with asylum seekers? | |
| 6 Did you feel supported adequately throughout your time at the shelter? | |
| 7 Is there anything we could improve/need to remember for next year? Or anything you’ve particularly enjoyed? | |
| 8 Are there any moments/conversations/stories that you would like us to share to encourage others who may consider taking part next year? Don’t break confidentiality! | |
| 9 Any other comments? | |
| ***Your details (optional)*** | |
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| Your name: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| Tel: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| Email: | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | |
| Venue you volunteered in | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

*Thank you for your feedback!*

***your critical input is essential for the shelter to continue to improve our services.***