**Form 3: Central Student Government/ College Council/ AECO**

***To the organization officers:***

 Form 3 is intended to assess your organization’s relationship with the Central Student Government or with your respective college councils. If you are a college council, please give this form to CSG; if you are a co-curricular organization, to your college council; and if you are an extra-curricular organization, to your AECO convener. Retrieve accomplished form and submit to OSA-SACDEV not later than the deadline.

***To the evaluating organization (CSG/ College Council/ AECO Convener):***

 Form 3 is the third component of the revised evaluation system. Your honest and objective evaluation will greatly contribute to the objectives of this evaluation. **Please use the scale below to rate how well your evaluated organization satisfies the given statements. Mark the box corresponding to the rating you have chosen with an “X”.** For specially-marked items with “**║**,” please provide the information asked. ***Return this form, in a sealed long letter envelope, signed across the flap to the evaluated organization. PLEASE DO NOT LET THE ORGANIZATION SEE YOUR RATING.*** *On the envelope, please write the organization’s name.*

***Rating Scale:***

|  |  |  |
| --- | --- | --- |
| **5** | ***Exemplary*** | Task/ condition is performed at all times; commendable and effective |
| **4** | ***Advanced*** | Task/ condition is performed most of the time; competent with minimal supervision required |
| **3** | ***Improved***  | Task/ condition is performed sometimes; occasional supervision is required |
| **2** | ***Basic*** | Task/ condition is seldom performed; needs constant supervision |
| **1** | ***Deficient*** | Task/ condition is rarely performed |

|  |  |
| --- | --- |
| **Name of Organization being evaluated:** (Acronym will do.) | **Date of Evaluation:** |
| **Name of Evaluating Organization:** (Acronym will do.) | **Signature of Evaluator:** |

|  |
| --- |
| **Part A: Organizational Development** |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. **Active Support to CSG/ College Council/ AECO**
 | ***5*** | ***4*** | ***3*** | ***2*** | ***1*** |
| * 1. The organization regularly gives feedback to CSG/ college council.
 |  |  |  |  |  |
| * 1. The organization objectively lobbies concern to CSG/ college council.
 |  |  |  |  |  |
| * 1. The organization regularly attends (or sends representative) to the meetings called by CSG/ college council.
 |  |  |  |  |  |
| * 1. The organization accepts responsibilities given by CSG/ college council *(e.g. tasked to spearhead a project).*
 |  |  |  |  |  |
| * 1. The organization regularly participates in the projects organized by CSG/ college council. *(e.g. inter-organizational contests, participation in book drive spearheaded by the government/ college council.)*
 |  |  |  |  |  |

**║ PAUSE!** *For item 1.3:* Please cite an instance where you entrusted a particular responsibility to the organization you are evaluating.

What was the response?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*For item 1.4:* Please cite projects initiated by CSG/ college council and actively participated by the organization you are

evaluating. You may also include projects/ activities undertaken in partnership with this organization.

|  |  |
| --- | --- |
| **Date Implemented** | **Name of Project/ Activity** |
|  |  |
|  |  |

 *(Please attach sheet if space is not enough.)*

**--- *Evaluation ends here. ---***

*Thank you very much for your time and effort in filling-out this form.*