

HRM Division, RCSC  
**Evaluation of Volunteer Programmes in Bhutan**  
**EVALUATION FORM 1**

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***PART I: TO BE COMPLETED JOINTLY BY THE VOLUNTEER'S COUNTERPART AND VOLUNTEER USING JOB DESCRIPTIONS/TOR AS A REFERENCE POINT.***

**Q. 1. About the Volunteer's Counterpart:**

- a. Agency to which the Counterpart belongs :
- Ministry/Agency/Dzongkhag :
  - Department :
  - Division/School :
- b. Briefly provide an overview of the "Vision" and "Mission" of your Agency.
- c. Please outline your duties and responsibilities (please attach additional pages if required).
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- d. What is the duration of the period you have worked with the volunteer?

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**NOTE: This report must be completed at after the six months of Volunteer's tenure and submit it to the RCSC one week after the date of completion of this Report.**

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- from day/month/year/ ..... to .....

**Q. 2. About the Volunteer:**

Volunteer's Name :

Volunteer's Position :

a. Agency to which the Volunteers is attached with:

- Ministry/Agency/Dzongkhag :

- Department :

- Division/School :

- Place of posting/location :

b. Qualifications, including knowledge, skills and experience of the Volunteer (please attach an additional sheet of information if required):

- Qualifications :

- Knowledge and skills :

- Work Experience :

c. Briefly outline the your duties and responsibilities (please attach additional pages if required)

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e. The duration of the period the volunteer worked with the Agency:

- from day/month/year/ ..... to.....

**Q.3. Outline the main activities completed by the Volunteer since taking up the assignment.** (please attach additional pages if required)

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**Q.4. Indicate whether the resources as mentioned in the TOR/Job Description are in place. Provide plans and strategies to address this if not in place.**

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**Q.5. Describe any other issue that you (Counterpart and Volunteer) consider may impact on the future progress of the assignment.**

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**Q.5. Anything else that you would like the RCSC to be aware of?**

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**Volunteer's counterpart**

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Signature and date :.....

Name and Position Title :.....

Division and Department/Agency/ Dzongkhag.....

**Volunteer**

Signature and date :.....

Name and Position Title :.....

***PART II: TO BE COMPLETED BY THE HEAD OF THE DEPARTMENT/AGENCY/DZONGKHAG***

Comments of the Head of the Department/Agency/Dzongkhag

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Signature and date :.....

Name and Position Title :.....

Department/Agency/ Dzongkhag.....

Thank you for your cooperation in completing the Volunteer Evaluation Form 1.

**THE END**

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