

## Appendix 6: Evaluation

### No Small Change Evaluation Form

Name (optional): .....

Date: .....

	Bad		Okay		Amazing
How would you rate the experience of participating in No Small Change?	1	2	3	4	5

What were your expectations for No Small Change? Were they met? Did they change?

What did you learn from this experience?

What was the most rewarding aspect of participating?

What could have been done better, if anything?

Do you think differently about *tzedakah* now than you did before you participated in this group?

Do you think having participated in this group will affect how you give *tzedakah* in the future? If so, how?

Would you do this again, or recommend it to a friend?