

# TROOP COOKIE MANAGER EVALUATION FORM

Rate each aspect by circling the number that applies according to this scale:

1 = Excellent      2 = Very Good      3 = Good      4 = Fair      5 = Poor

Area: \_\_\_\_\_ Service Unit: \_\_\_\_\_

Location of cookie training: \_\_\_\_\_

	Excellent	Very Good	Good	Fair	Poor
<b>TRAINING</b>					
Location	1	2	3	4	5
Length of time it took	1	2	3	4	5
Time of day it was held	1	2	3	4	5
Materials covered	1	2	3	4	5
Level of helpfulness	1	2	3	4	5
<b>SALES MATERIALS</b>					
Ease of understanding	1	2	3	4	5
Quantity	1	2	3	4	5
SNAP reports	1	2	3	4	5
<b>COMMUNICATIONS &amp; SUPPORT</b>					
From your service unit cookie manager	1	2	3	4	5
From your cookie cupboard manager	1	2	3	4	5
From your cookie booth sale coordinator	1	2	3	4	5
Publicity in your area	1	2	3	4	5
Cookie PR with Pizzazz materials	1	2	3	4	5
Cookie Booth in a Box kits	1	2	3	4	5
<b>DELIVERY/DELIVERY SITE</b>					
Advance notification	1	2	3	4	5
On-time delivery	1	2	3	4	5
Condition of site	1	2	3	4	5
Organization of cookie pickup	1	2	3	4	5
<b>COOKIES</b>					
Quality	1	2	3	4	5
Variety	1	2	3	4	5
Packaging	1	2	3	4	5
Customer reaction	1	2	3	4	5
<b>TRAINING TOOLS</b>					
Theme	1	2	3	4	5
Troop CD	1	2	3	4	5
Goal chart	1	2	3	4	5
Safety games	1	2	3	4	5
Girl order card	1	2	3	4	5
ABC website	1	2	3	4	5
Online Marketing for Girls	1	2	3	4	5
<b>PROGRAM LINKS</b>					
GSUSA activity pin	1	2	3	4	5
Daisy Activity Books	1	2	3	4	5
Brownie Try-Its	1	2	3	4	5
Junior Badges	1	2	3	4	5
Interest Project	1	2	3	4	5
ABC Cookie Zone	1	2	3	4	5
<b>OVERALL</b>	1	2	3	4	5

If you have circled a 4 or a 5, please explain on back.

Over... 

**GOAL SETTING**

- |   |                              |                             |
|---|------------------------------|-----------------------------|
| Did you use the goal chart with your troop? | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Were parents invited to your training?      | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Did parents attend training?                | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Does your troop have a budget?              | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Did setting a goal increase your sales?     | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Would you do goal setting with girls again? | <input type="checkbox"/> yes | <input type="checkbox"/> no |
| Did any of your girls do Online Marketing ? | <input type="checkbox"/> yes | <input type="checkbox"/> no |

What did you like best about the sale? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What did you do to promote your sale? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What items did you use or like the most in the Cookie PR with Pizzazz booklet? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please explain any ratings of fair or poor. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What suggestions do you have for improving the sale? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please turn in this evaluation form with all other forms. Include your comments and suggestions for improving our cookie sale. Your help is sincerely appreciated. Your cookie committee reads these forms and uses your comments and suggestions for planning next year's sale.