

NATIONAL AMERICAN INDIAN HOUSING COUNCIL

SCHOLARSHIP PROGRAM

EVALUATION FORM

Name (First/Middle/Last): _____

Tribe/IHA/TDHE: _____

Mailing Address: _____

Work Phone Number: _____

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Class/Workshop/Event Attended: \_\_\_\_\_

Class/Workshop/Event Location: \_\_\_\_\_

Class/Workshop/Event Date(s): \_\_\_\_\_ to \_\_\_\_\_

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In your own words, briefly describe how the award of this scholarship benefited you and/or your tribe/IHA/TDHE and any impact it has had on the way you and/or your tribe/IHA/TDHE now does business. Additionally, give a specific example (or examples) of how the knowledge/practices/techniques learned at this class/workshop/event have been adopted/implemented by you and/or your tribe/IHA/TDHE. (Use additional sheets of paper if needed).

(Signature of Scholarship Recipient)

(Date)

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Feedback that “*measures*” the benefits derived from the program is vital to support NAIHC’s efforts to seek continued funding for this program through congressional appropriations. Your cooperation in providing that feedback is very much appreciated.

**Please mail or fax evaluation form to:**

National American Indian Housing Council  
900 2<sup>nd</sup> Street NE, Suite 107  
Washington, DC 20002  
Phone: 202.789.1754 Fax: 202.789.1758  
[www.naihc.net](http://www.naihc.net)