



Fellowship Program

FELLOW:

BOARD LIAISON/ADVISOR:

(Fellow Name)

(Liaison Name)

(Track)

(Dates i.e. 2007-2008)

FELLOWSHIP FOLLOWUP QUESTIONNAIRE

- What was your general response to the fellowship experience?

- What were the three most valuable portions of the experience?

- What was the least useful or least enjoyable experience?

- How do you believe that the fellowship will enhance your contribution to the field of philanthropy, education/healthcare in general or your organization?

- What have you already done differently as a result of your fellowship?

- What plans do you have for the future that results from your fellowship?

- What concrete outcomes will result from your fellowship?

Board Liaison/Advisor Signature

Date