

PLEASE NOTE: This document is only a template. You'll need to submit your report via this link: https://form.jotform.com/StewardsIPP/StewardsFinalReportandPostSurvey

#### Last Name \*

Email \*

example@example.com

Site Name (Please do not abbreviate) \*

Supervisor Name \*

Supervisor Email \*

example@example.com

#### Start Date \*

Month Day Year

#### End Date \*

Month Day Year

#### What Initiative are you with? \*

If you aren't sure, please ask your Stewards Coordinator.

Who is your Stewards Coordinator? \*

#### What is the length of your position? \*

300-675 hours / 1-25 weeks 900-1700 hours / 26-52 weeks

## **CVA Final Report**

# Please summarize all of your project work completed for your entire term of service. Which of these projects are you most proud of? \*

Describe any challenges faced in accomplishing the projects identified in your workplan. \*

If you could make one recommendation to the Director of the National Park Service on how the NPS can better connect with young people/adults what would you say? \*

What other jobs/career fields would you be interested in learning more about? \*

Do you feel as if your work made a contribution towards the mission of the National Park Service? How or why not? \*

Why are the national parks important to you, or not important to you? \*

How much influence did the program you interned with have on your answer to the previous question? Please rate from 1 (no influence) to 5 (a lot of influence). Select one: \*

1 2 3 4 5

No Influence

A lot of Influence

Did your experience during this internship influence your career goals? If so, how? \*

If you received any trainings and/ or certifications during your term, please choose all that apply. If none on the list apply, please select other and describe the training and/or certification you received. \*

First Aid/CPR/AED Wilderness First Responder OSHA 30 hour training Wilderness First Aid OSHA 10 hour training Commercial Driver's License

**Pesticide Applicator** 

Urban Forestry Certification

Lead Renovation, Repair & Painting

Stormwater Management or Green Infrastructure Certification Strata IT Fundamentals

In order to follow up with you on your professional accomplishments, we would like to be able to contact you after your internship concludes. Please enter your preferred method of contact.

Response

Phone

Email

Do you have a job, internship, or apprenticeship lined up after you complete your term? \*

Please describe in greater detail what your plans are after you complete this internship. If you are transitioning to a federal position, please include the position title and the GS level for our reporting. \*

Please describe how you plan to use your AmeriCorps Education Award (if applicable).

## **Quantitative Reporting**

Please provdie quantitative data related to the project areas below.

Number of individual volunteers engaged through your CVA service. \*

Number of hours contributed by individual volunteers. \*

Number of group volunteers engaged through your CVA service. \*

Number of hours contributed by group volunteers. \*

Number of volunteers who are youth. \*

Number of volunteers who are veterans. \*

Number of people engaged through park's social media (Facebook, Instragram, etc). \*

Number of active partnerships involved in CVA projects. \*

## **Photo Upload**

Please upload the following:

1. Upload **5 high resolution action photos** with you in at least 3 of them. Please name photos in the following format: Site name\_year\_Program\_Last Name\_First Name\_Photo 1 Ex: GRCA\_2019\_RTCA\_Smith\_John\_Photo1

2. Upload a completed photo caption Word document describing your photos.

## **CVA Post-Survey**

Your evaluation of Stewards and your Supervisor(s) helps us maintain high quality positions. Combined with your reports, this evaluation helps Stewards understand your experience from the ground up, highlighting program successes and areas for improvement. Please answer these questions honestly. We will not show your evaluation to your supervisor and it will not influence your ability to participate in another Stewards program. Your feedback is important and will be taken seriously.

#### Was enrollment in the program adequate? \*

Yes

No

#### Did you participate or watch the recording for CVA-specific trainings? \*

Yes No

#### Please provide any feedback on the provided trainings.

# What topics of virtual webinars would you have liked to be offered during your position to further your professional development? \*

#### Are there any additional trainings you would like to recommend for the CVA program? \*

Yes

No

#### Please assess the quality of the internship and how well it matched your expectations.

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
I was set up for success at the beginning of this internship.					
The daily duties and skills required by this position accurately matched the position description from the internet and during my interview.					
This position helped to define or further refine my professional goals.					
The position helped me build skills and gain experience to become a competent professional in my field.					
This position increased my ability to interact with diverse groups of people.					
I would participate in this program again.					

# Elaborate on any topics related to the quality of the internship and how it helped or hindered you professionally.

#### Please assess the quality of support from Stewards.

Strongly	Licadroo	Neither Agree	A	Strongly
Disagree		nor Disagree	Agree	Agree

Stewards staff provided helpful support with the onboarding process. Stewards staff gave clear explanations of position requirements. Stewards staff addressed questions/concerns in a timely manner. Stewards staff addressed questions I had about professional goals. Stewards staff provided useful trainings resources to support my professional development.

I would participate in this program again.

#### Elaborate on any topics related to the quality of support from Stewards.

#### Please assess the quality of support from your Supervisor (mentor).

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
I had ongoing communication with my supervisor throughout my term and received adequate supervision.					
I felt encouraged to participate in personal and professional development opportunities by my supervisor and/or other staff at the site.					
My site supervisor provided clear and sufficient training for new skills.					
My site supervisor provided ongoing positive and constructive feedback.					
My site supervisor clearly communicated work expectations.					

Elaborate on any topics related to the quality of support from Supervisor (mentor).

### **Project Accomplishment Information**

Please make sure to enter any final accomplishments in your Conservation Legacy portal. You should have received monthly automatic emails from Conservation Legacy with a link to this form. If you did not submit any during your term, please go ahead and do so.

If you're not sure how to complete them, please visit this resource or ask your Program Contact.

## Again, just a reminder, a copy of your Final Report will be automatically sent to your supervisor upon submission. Survey responses will not be sent to your Supervisor.

If you have other questions or concerns you would like to bring up, please contact your coordinator, {whoIs}, directly at {coordinatorEmail}