

**Evaluation Form:
AMP Country Technical Assistance**

please note 1 = excellent, 2 = good, 3 = satisfactory, 4 = poor 5= very poor

In what capacity are you filling this form? (tick box(es))	CCM	NMCP	PR	SR	<u>Partner organization</u>
Country:	NIGERIA				
Name:	GODWIN AIDENAGBON				
Email address:	gaidenagbon@gmail.com				

I. Technical Support – In country missions with NMCP and partners

Was the support you received from AMP appropriate?

Yes. It was appropriate

Did the support meet your needs?

It positively impacted on my performance

Was the support provided in a timely fashion?

It was provided in a timely fashion

Do you have any suggestions to improve future support?

Support needs to be discussed with direct recipients of the support so as to fully exhaust the scope of technical assistance needed.

Consultants

Please assess the consultant(s) that provided support to your country in terms of technical competence, communication skills, team-work and partnership skills?					
3.1.1 Technical competence	<u>1</u>	2	3	4	5
3.1.2 Communication skills	1	<u>2</u>	3	4	5
3.1.3 Team-work	1	<u>2</u>	3	4	5
3.1.4 Partnership skills	1	<u>2</u>	3	4	5

	Yes	No
3.2 Did the consultant fulfil the agreed terms of reference?	<i>yes</i>	
3.2.1 Overall, was the consultant(s) assigned to your country team appropriate?	<i>yes</i>	

3.3 Would you be willing to work with the same consultant again?	<u>Yes</u>	No
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3.4 Any additional comments on the consultant or partner that provided support?
