 **Assistant Governor Club Visit Year End Final Report**

**Assistant Governors**: Complete this form after you have conducted your final visit to each club and submit it to the Assistant Governor Coordinator and District Governor by May 15th.

**Assistant Governor Coordinator and District Governor:** Review, sign, date, and add your feedback to the report and submit it to the District Administrator by June 1st. All AG annual reports are filed as district records.

Rotary Club of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ District \_\_\_\_\_\_\_\_\_\_\_

Assistant Governor Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Assistant Governor made \_\_\_\_\_\_\_ total visits to this club in the past year.

**Please mark the appropriate boxes and answer the questions below. If you answer NO to any questions, or score clubs lower than average, add comments at the end to explain.**

**Membership**

 1. What was the club’s membership goal for this past year? \_\_\_\_\_\_\_

 2. Beginning membership number \_\_\_\_\_\_ Ending membership number \_\_\_\_\_

 3. Did the club achieve a net growth in membership this year? Yes or No

 4. Did the club implement a membership recruitment and retention plan? Yes or No

 5. Did the club conduct an orientation program for new members? Yes or No

**Service Project Participation**

 6. What was the clubs goal on the number of community service projects they planned to

 conduct? \_\_\_\_\_\_ Did they achieve this goal? Yes or No

 7. What was the clubs goal on the number of members that would participate in projects over

 the past year? \_\_\_\_\_\_ Did they achieve this goal? Yes or No

 8. Is the club engaged in conducting international service activities? Yes or No

**The Rotary Foundation**

 9. What is the club’s goal on the total amount of money that its members planned to

 contribute to The Rotary Foundation over the past year? \_\_\_\_\_\_\_\_\_\_

10. Did the club achieve its goal for The Rotary Foundation contributions? Yes or No

11. What was the club’s goal on the total amount of money that its members planned to

 contribute towards the PolioPlus fund? \_\_\_\_\_\_\_\_

12. Did the club achieve its goal to the PolioPlus fund? Yes or No

**Development of Future Leaders**

13. Did the Club select a President-Elect prior to District PE Orientation? Yes or No

14. Did the Club President-Elect attend the District PE Orientation and/or NC PETS? Yes or No

15. How many club members attended leadership development programs during this past

 year? (One Summit, DEI Summit, Spring Education Assembly, RLI, etc.) \_\_\_\_\_\_

16. How many club members attended the district conference? \_\_\_\_\_\_

**Public Image**

17. Did the club achieve its public image goals for the year? Yes or No

**Criteria for a highly effective and functioning Rotary Club**

Did this club ……

18. Conduct meetings, service project, socials, and fundraiser events minimally twice each

 month according to RI standards? The goal is weekly. Yes or No

19. Pay its membership and district dues on time without assistance? Yes or No

20. Pay its member per capita dues to RI on time without assistance? Yes or No

21. Act in a manner consistent with the RI and D6000 Constitution, Bylaws, and Code of Policies

 and Procedures? Yes or No

22. Maintain cooperative relations with AG and district officers? Yes or No

23. **How were your visits received by the club? Check one of the below choices.**

 **I was very welcome.** The club proactively contacted me in advance of AG and DG visits

 and presented agenda, subjects, and issues they wished to discuss.

 **I was welcome.** The club greeted me warmly and was adequately prepared to discuss its

 progress.

 **My visit was treated as an administrative obligation.** The club did minimal preparations

 and was not interested in “outside” suggestions.

 **I was not welcome.** Please explain at the end of this document.

 **The Club refused to accept my visit.** Please explain at the end of this document.

**24. What is your overall rating of the club?**

 **Excellent:** The members of this club are informed and engaged in full support of the four

 elements of an effective club because they are able to: sustain and/or grow their

 membership base; implement successful projects that address the needs of their local

 community and communities in other countries; support The Rotary Foundation and

 PolioPlus through both program participation and financial contributions; and develop

 leaders capable of serving in Rotary beyond the club level.

 **Good**: The members of this club appeared to be informed and engaged, but could

 increase their effectiveness by focusing on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 **Adequate**: The club functions but needs significant improvement.

 **Poor:** This club is in need of much assistance.

 **Nonfunctioning Club:** The club failed to meet the criteria established by the RI Board in its

 policy for a functioning Rotary club (refer to questions 18-22 above).

Additional Comments and Suggestions:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Assistant Governor’s Name and Signature Date

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Assistant Governor Coordinator’s Name and Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

District Governor’s Name and Signature Date