

Vermont Governor's Council on Physical Fitness and Sports

Council Member Annual Personal Review

The following checklist is designated to help individuals assess their role as members of the Vermont Governor's Council on Physical Fitness and Sports. Your candid responses will be helpful in designing a program for new council member orientation and future council development.

	<u>Yes</u>	<u>No</u>	<u>Somewhat or Sometimes</u>										
1. Do you feel you have adequate opportunity to understand your obligations, responsibilities and opportunities for growth as a council member?	_____	_____	_____										
2. Do you have a clear grasp of your standing committee and/or subcommittee responsibilities?	_____	_____	_____										
3. Are you familiar with the stated mission, program plan, by-laws, budget and current policies of the Governor's Council?	_____	_____	_____										
4. Do you have sufficient opportunities to become acquainted with your fellow council and committee members?	_____	_____	_____										
5. What do you feel are your strongest areas of expertise based on your background and experience (mark with an x)?													
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%;"><input type="checkbox"/> budget/finance</td> <td style="width: 50%;"><input type="checkbox"/> media/public relations</td> </tr> <tr> <td><input type="checkbox"/> low income fitness</td> <td><input type="checkbox"/> youth fitness</td> </tr> <tr> <td><input type="checkbox"/> marketing</td> <td><input type="checkbox"/> senior fitness</td> </tr> <tr> <td><input type="checkbox"/> special events</td> <td><input type="checkbox"/> worksite wellness</td> </tr> <tr> <td><input type="checkbox"/> sports/recreation</td> <td><input type="checkbox"/> other</td> </tr> </table>	<input type="checkbox"/> budget/finance	<input type="checkbox"/> media/public relations	<input type="checkbox"/> low income fitness	<input type="checkbox"/> youth fitness	<input type="checkbox"/> marketing	<input type="checkbox"/> senior fitness	<input type="checkbox"/> special events	<input type="checkbox"/> worksite wellness	<input type="checkbox"/> sports/recreation	<input type="checkbox"/> other			
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Now go back and indicate any primary areas of interest outside of your area of expertise (mark with a +).													
6. Do you feel well informed about the type of programs offered by the Governor's Council?	_____	_____	_____										
7. Have you recently attended a Governor's Council event?	_____	_____	_____										
8. Are you satisfied with your attendance at committee meetings and council meetings?	_____	_____	_____										
9. Do you suggest to the nominating committee individuals who would make outstanding new council members?	_____	_____	_____										
10. Would you be willing to serve as a committee chair?	_____	_____	_____										
11. Are you satisfied that there are no real or apparent conflicts of interest in your service as a council member?	_____	_____	_____										

12. Have you found your council membership to be stimulating and rewarding thus far? _____

Why or why not? _____

13. Based on the information contained in the Personal Review, how would you rate your performance as a council member at this time?

14. Suggestions for how you could be more effective as a council member:

15. Suggestions for how the council could be improved:

Name

Date