

# MISSION TO VIRGINIA

*The Church That Helps People.*

## ASSESSMENT FORM

**Homeowner:**

**Address:**

**Telephone:**

*Directions to home from Church attached. Please call homeowner prior to assessment.*

**Team Leader:**

**Team leader's email address:** \_\_\_\_\_

**Projects requested:**

**Additional projects that need to be completed:**

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**Supplies and equipment needed to complete projects** *(Please identify items that need to be purchased separately):*

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**How many volunteers are needed to complete project?** \_\_\_\_\_

**Special skills needed?** \_\_\_\_\_

**Is a Waiver Form required?** \_\_\_\_\_ *If yes, please have homeowner complete while you wait and return waiver form with this assessment sheet.*

*\*This form should be returned to your church M2VA Leader no later than \_\_\_\_\_.*