

End-of-event Participant Evaluation Form

Multiple Choice Section

Event Title

Your Country

Event Location

Dates of Event

From

To

Please respond to the following questions by ticking one box only for each question.

There is a separate sheet for narrative comment which should be used particularly to explain a low score and/or if you have any criticism or suggestions for improvement.

Your views are very important and will help us to improve our events, facilities, etc.

Section 1 – event

Scoring Example

6	5	4	3	2	1
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- 1 Overall, my satisfaction with this event was... high low
- 2 The benefit of being introduced to OECD taxation concepts and practices was... high low
- 3 The relevance of the event for my current work was... high low
- 4 The benefit of meeting colleagues/exchanging information in an international context was... high low
- 5 The level of difficulty of the event was... ideal too high
too low

Section 2 – materials

- 6 The usefulness of the background material was... high low
- 7 The usefulness of event handouts (overheads, case studies, etc) was... high low

Section 3 – event delivery

- 8 Overall, the quality of discussions and dialogue for this event was... high low
- 9 The opportunities for participants to interact (have questions answered, share concerns and experiences, etc) during the event were... ideal too many
too few
- 10 The time devoted to case studies and other interactive activities was... ideal too much
too little
- 11 The time devoted to presentations by participants was... ideal too much
too little

Section 4 – event administration

- 12 Overall, my satisfaction with the administration of the event was... high low
- 13 The quality of pre-event administration was... high low
- 14 Did you receive syllabus and event information in sufficient time before the event for them to be useful? yes no
- 15 Did you receive practical information (about the accommodation and other facilities, etc) prior to the event? yes no
- 16 The usefulness of information received was... high low

Section 5 – event facilities

- 17 The quality of the facilities (rooms, furniture, communication aids, photocopying, etc) provided at the event was... high low
- 18 The quality of the accommodation (sleeping quarters, meals, common areas, services, etc), where provided, was... high low
- 19 The quality of the administration (staff responsiveness, etc) at the event was... high low

End-of-event Participant Evaluation Form Narrative Comment Section

Event Title

Your Country Event Location

Dates of Event From To

Please make any comments/suggestions in the relevant spaces below. Please continue on a separate sheet if necessary.

Section 1 – event

Please comment on topics within the event subject matter which you feel should be covered in greater depth/added and/or should be given reduced coverage/dropped.

Section 2 – materials

Please comment on improvements which could be made to background material and/or event handouts (including the quality of translation if applicable).

Section 3 – event delivery

Please comment on strengths and/or weaknesses exhibited by the experts (including the quality of interpretation if applicable).

Section 4 – event administration

Please comment on the administration of the event and include any suggestions you have for improvement.

Section 5 – event facilities

Please comment on the event facilities and include any suggestions you have to improve these facilities.

Please return the completed questionnaire to your event leader. Thank you for your co-operation.