**Conference Event Feedback Form**

**Conference Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Content Quality**
	* **How satisfied were you with the conference content?**
	* **Very Satisfied ☐ Satisfied ☐ Neutral ☐ Unsatisfied ☐**
2. **Session Organization**
	* **Were the sessions organized effectively?**
	* **Yes ☐ No ☐**
3. **Attendee Interaction**
	* **How engaging was the attendee interaction?**
	* **Very Engaging ☐ Engaging ☐ Neutral ☐ Disengaged ☐**
4. **Suggestions for Future Conferences**
	* **Please provide your feedback for future improvements:**

**Feedback Table**

| **Session Quality** | **Excellent** | **Good** | **Fair** | **Needs Improvement** |
| --- | --- | --- | --- | --- |
| **Morning Session** | **☐** | **☐** | **☐** | **☐** |
| **Afternoon Panel** | **☐** | **☐** | **☐** | **☐** |
| **Evening Workshop** | **☐** | **☐** | **☐** | **☐** |
| **Closing Speech** | **☐** | **☐** | **☐** | **☐** |