**Corporate Event Feedback Form**

**Event Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Company Represented: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. **Relevance to Your Business**
   * **How relevant was the event to your company’s interests?**
   * **Very Relevant ☐ Relevant ☐ Not Relevant ☐**
2. **Networking Opportunities**
   * **Did you find value in networking opportunities?**
   * **Excellent ☐ Good ☐ Average ☐ Poor ☐**
3. **Overall Organization**
   * **Rate the event organization:**
   * **Excellent ☐ Good ☐ Average ☐ Poor ☐**
4. **Quality of Exhibits/Booths**
   * **How would you rate the quality of exhibits?**
   * **Excellent ☐ Good ☐ Average ☐ Poor ☐**

**Comments and Suggestions:**

**Rate the Following**

| **Criteria** | **Excellent** | **Good** | **Average** | **Poor** |
| --- | --- | --- | --- | --- |
| **Event Coordination** | **☐** | **☐** | **☐** | **☐** |
| **Venue Amenities** | **☐** | **☐** | **☐** | **☐** |
| **Speaker Quality** | **☐** | **☐** | **☐** | **☐** |
| **Schedule Adherence** | **☐** | **☐** | **☐** | **☐** |