**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** | **☐** | **☐** | **☐** | **☐** |