**Post Event Evaluation Form**

**Event Information
 Event Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 Date: \_\_\_\_\_\_\_\_\_\_\_\_
 Organizer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 Venue: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**1. Rate the event on the following criteria:**

| **Aspect** | **Excellent** | **Good** | **Fair** | **Poor** |
| --- | --- | --- | --- | --- |
| **Overall Organization** | **☐** | **☐** | **☐** | **☐** |
| **Speaker/Trainer Effectiveness** | **☐** | **☐** | **☐** | **☐** |
| **Attendee Engagement** | **☐** | **☐** | **☐** | **☐** |
| **Event Timing and Schedule** | **☐** | **☐** | **☐** | **☐** |
| **Facilities and Logistics** | **☐** | **☐** | **☐** | **☐** |
| **Value for Money** | **☐** | **☐** | **☐** | **☐** |
| **Accessibility** | **☐** | **☐** | **☐** | **☐** |
| **Would Attend Again** | **☐ Yes ☐ No** |  |  |  |

**2. What did you find most valuable in this event?**

**3. What could have been improved?**

**4. Would you recommend this event to others?
 ☐ Yes ☐ No**

**5. Additional Comments:**