

# EVENT EVALUATION

GROUP NAME \_\_\_\_\_

Event coordinators should complete this evaluation form after each event and return it to your advisor within five days of the event. This form is a tool to improve future events and to create a history for future coordinators. This information should also be used to create quarterly reports.

EVENT NAME \_\_\_\_\_ DATE OF EVENT \_\_\_\_\_

1. Total number of people in your audience at this event? \_\_\_\_\_
2. Would you work with this artist/entertainer again?            YES NO
3. Did your advertising reach your target audience?            YES NO
4. Would you recommend this event be done again?            YES NO
5. Did you encounter any problem with campus services        YES NO

*explain:* \_\_\_\_\_

6. Did you have enough help from your constituents?            YES NO

7. Total amount of money spent on this event?                    \$ \_\_\_\_\_

8. Did this event meet the goals and expectations as planned? (explain)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. What two things could be done differently to make future events better?

\_\_\_\_\_

\_\_\_\_\_

Other comments \_\_\_\_\_

\_\_\_\_\_

*(do not write below line)*

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Date returned to Outreach Coordinator \_\_\_\_\_ Date sent to advisor \_\_\_\_\_

S & A Advisor's comments: