



PROGRAM EVALUATION

Thank you for attending today's program! Your feedback will help us improve!

Your Name: _____

Firm: _____

Daytime Phone: _____ E-Mail: _____

1.) How well did this program match your expectation and interest?

Good Match				Poor Match
4	3	2		1

2.) What motivated you to attend this program?

Topic **Speaker(s)** **Location** **Other** _____

3.) Was the time given for questions and answers satisfactory?

Very Satisfying			Not At All
4	3	2	1

4.) What was the best part of this program? _____

5.) How could this program/meeting have run more smoothly, or how could we have been more effective? _____

6.) Did you have adequate time for networking, exchanging business cards, and scheduling a follow-up meeting? Who did you meet that you feel you will contact for future business? _____

Would you like to join a WCR Committee, Specifically _____

Comments and suggestions for future meetings _____
