



GK Event Evaluation Form

General information

Name of event: _____
Date: _____
Time: _____
Location: _____

Event objectives

Brief description of the event

Event promotion

Number of invitations mailed: _____
Date invitations mailed: _____
Anticipated attendance: _____
Attendance: _____

Other methods used for promoting the event (circle all that apply)

Posters Brochures Newspaper ads
Flyers Email Website
Other:





Budget information

Anticipated budget: \$ _____

Final cost of event: \$ _____

Recommendations

Event Logistics

Rate the quality of the following (circle no.)

	Excellent		Satisfactory		Need Improvement		Recommendations
Meeting objectives	5	4	3	2	1	0	
Facilities/Venue	5	4	3	2	1	0	
Parking	5	4	3	2	1	0	
Set-up	5	4	3	2	1	0	
Event timing	5	4	3	2	1	0	
Scenario/Program	5	4	3	2	1	0	
Speaker(s)	5	4	3	2	1	0	
Advertising/Promotions	5	4	3	2	1	0	
Caterer – service	5	4	3	2	1	0	





Caterer - food	5	4	3	2	1	0	
Audio/Visual	5	4	3	2	1	0	
Decorations	5	4	3	2	1	0	
Staffing/Volunteers	5	4	3	2	1	0	

Total: /65

Positives elements (strengths):

Elements to improve (weaknesses):

Additional comments and recommendations for future events:
