



Office of Event Planning
Event Evaluation Form

Event Name:

Point of Contact for Event:

Event Coordinator:

Was your program/event goal met?

How was your program advertised?

If your event was by invitation, did you get the anticipated number of guests? Why or why not?

Would you recommend repeating this event?

Was the event an overall success? Why or why not?

Budget Changes for next time:

Follow up necessary? With whom, on what?

Additional comments or suggestions on things our office did well and or ways our office can better assist you in achieving your goals?