

Feedback form

Event / service

Date

Please rate each statement: 1 = strongly disagree, 5 = strongly agree.

Statement	1	2	3	4	5
The content met my expectations					
The organisation was good					
The venue or format worked well					
I would recommend this to others					
Overall, I was satisfied					

What did you like most?

What could be improved?

Name (optional)

Email (optional)

Notes
