

# Seminar Evaluation

Name (optional): \_\_\_\_\_

Thank you for attending our Seminar. Please share your impression of the various aspects of the seminar, so we can improve the experience for future attendees.

Seminar Rating		Extremely Good	Good	Neutral	Poor	Extremely Poor
1	Overall how would you rate the Seminar?					
2	Based on this experience, how likely are you to attend future seminars?					
3	Based on this experience and what you learned, how likely are you to take action with your financial situation?					
4	Based on your experience, how likely are you to recommend this seminar to a friend or colleague?					
Seminar Presentation		Extremely Good	Good	Neutral	Poor	Extremely Poor
5	Relevance of the Topic					
6	Usefulness of Information					
7	Quality of the Presentation					
8	Effectiveness of the Presenter(s)					
9	Handouts					

# Seminar Evaluation Form

Seminar Logistics		Extremely Good	Good	Neutral	Poor	Extremely Poor
10	Invitations and Guest List					
11	Scheduling and Timing					
12	Choice of Facility/Venue					
13	Parking and Directions					
14	Refreshments					

18. What was your favorite part of the seminar?

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19. What was your least favorite part of the seminar?

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20. Do you have other suggestions or comments to help us improve future seminars?

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**Optional**

Please contact me for a follow on conversation:  Immediately  Next Month  In 6 Months  Next Year

Best method of contact:  Email: \_\_\_\_\_  Phone: \_\_\_\_\_