

# Event Feedback Template (Internal)

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Thank you so much for agreeing to take this survey, your feedback is important to us. Please be assured that all information will remain confidential.

The survey should only take a couple of minutes.

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## Survey Questions

### 1. Please indicate your level of satisfaction (1 being low/poor and 5 being high/good)

	1	2	3	4	5
Speaker	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Length of Event	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
AV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other (please specify)

### 2. Do you feel the (Event) has prepared/ provided you with (info) you require to (move forward)?

- ☐ Yes
- ☐ Neutral
- ☐ No

Please feel free to comment

### 3. Additional Comments (if you would like us to contact you, please include your name and email address)

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## End of Survey

If you have any further comments you would like to provide, please do not hesitate to send an email to [events@algonquincollege.com](mailto:events@algonquincollege.com).  
Thank you.