



Symposium & Workshop Evaluation Form

1. Please evaluate the following aspects of the Symposium & Workshop by marking the appropriate box. Your responses will be helpful in planning future events.

Pre-Symposium Information & Communication (Web Site, Registration Brochure, "Partners" E-mail, Contact Line)	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Registration (Online, Fax, Mail, Onsite)	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Symposium Handouts (Spiral-bound Program Guide, Complete Program Guide on Memory Stick, Fold-out Agenda)	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Technical Session Presentations (Selection/Diversity of Topics)	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Technical Session Presentations (Content/Quality)	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Poster & Exhibit Booth Sessions	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Symposium Support Staff	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor
Hotel Facilities	<input type="checkbox"/> Excellent	<input type="checkbox"/> Good	<input type="checkbox"/> Fair	<input type="checkbox"/> Poor

Please use this space to comment on any of the items above (i.e., feedback on a particular technical session; ease of registration; the opportunity for networking in the Exhibit Hall; helpfulness of support staff).

2. Did / do you plan to attend any of the five short courses during the Symposium & Workshop?

Yes No If yes, which one(s)? _____

Would you attend short courses during future Symposiums? Yes No

What topic(s) would you recommend for future short courses?

3. Overall, was the Symposium & Workshop agenda appropriately organized in terms of sequence and length of sessions?

Extremely effective Somewhat effective Not effective

Comments:

(Please continue on reverse side.)

4. What aspect(s) of the Symposium & Workshop did you find most beneficial?

- | | |
|--|---|
| <input type="checkbox"/> Technical Sessions | <input type="checkbox"/> Networking Opportunities |
| <input type="checkbox"/> Short Courses | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Poster/Booth Sessions | |

5. The Symposium & Workshop...

- | |
|---|
| <input type="checkbox"/> Exceeded my expectations |
| <input type="checkbox"/> Met my expectations |
| <input type="checkbox"/> Failed to meet my expectations |

Please elaborate on your response.

6. How could the value of the Symposium & Workshop be enhanced?

7. What technical session topics would you like considered for future Symposium & Workshop agendas?

8. Please use the space below for any other comments about the Symposium & Workshop.

Please check the appropriate box. I am a...

- | | |
|--|--|
| <input type="checkbox"/> Government Employee | <input type="checkbox"/> Member of the press |
| <input type="checkbox"/> Academician | <input type="checkbox"/> Other |
| <input type="checkbox"/> Contractor | |

The following information is optional.

Name: _____ Organization: _____

Before you leave this event, please complete and deposit this questionnaire in the boxes located inside the technical session rooms, in the Exhibit Hall, or at the Registration Desk. If you prefer, you may fax your completed Evaluation Form to (703) 478-0526 or mail it to:

*SERDP/ESTCP Support Office
ATTN: Karole Braunstein
11107 Sunset Hills Road, Suite 400, Reston, VA 20190*

Thank you for your feedback!