EVENT EVALUATION FORM

Name of Event: ________________________ Date: _____________ Time: ____________

Name: _____________________________ Position: _______________________________

Board, Commission, Committee: _____________________________________________

Name of Advisor: ___________________________________________________________

Co-Sponsor(s): _____________________________________________________________

Describe the Event:
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Location of the event: ________________________________________________________

Would you recommend this location again? If so why? If not, where would you suggest having the event?
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Attendance: ______________________

Did the date and time of your event work well? ______________________________

What factors impacted attendance? Suggestions for scheduling this event in the future?
___________________________________________________________________________
___________________________________________________________________________

Ticket sale date: _______ Ticket Price: Student - _______ Non-Student- _________

How many student tickets were sold? ______________________________

How many non-student tickets were sold? ______________________________

How many event safety staff were present (break down CSO, Police, ASPB Event staff, professional concert staff)?
___________________________________________________________________________

Total Budgeted for Event (attach copies if possible): ______________________

Actual Budget: __________ What event expenses were more than you expected?

Where there any budget “surprises”?________________________________________
___________________________________________________________________________

How many volunteers helped plan this event? _______________________________

How many volunteers helped at the actual event? ___________________________
Overall Success of the event: (low) 1 2 3 4 5 (high)
Did the event meet your goals? Did it fulfill the purpose that was proposed?
___________________________________________________________________________
___________________________________________________________________________

Promotion Success: (low) 1 2 3 4 5 (high)
What was your publicity plan for the event? What worked well/What didn’t?
___________________________________________________________________________
___________________________________________________________________________

Committee’s level of involvement: (low) 1 2 3 4 5 (high)
How were your committee members involved? What suggestions can you make to involve more students in this program?
___________________________________________________________________________
___________________________________________________________________________

Cooperativeness of agency/artist: (low) 1 2 3 4 5 (high)
Would you recommend this agency/artist? Why or why not?
___________________________________________________________________________
___________________________________________________________________________

What changes would you recommend making to this event to make it more successful?
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Did you utilize outside vendors/food service/providers for this event? If so, who were they and would you utilize them again? Why or why not? (List any contact information for the vendors)
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Additional Comments:
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________