



Event Feedback Template

Event			
Organizer			
Location			
Time		Number of invites	
Date		Number of attendees	

Please rate your experience by scoring the following criteria on a scale of 1 to 5.					
Criteria	1 Poor	2 Below average	3 Average	4 Good	5 Excellent
Venue	☐	☐	☐	☐	☐
Catering	☐	☐	☐	☐	☐
Entertainment	☐	☐	☐	☐	☐
Transportation	☐	☐	☐	☐	☐
Staff	☐	☐	☐	☐	☐
Accommodation	☐	☐	☐	☐	☐
Decoration	☐	☐	☐	☐	☐
Speakers/Presenters	☐	☐	☐	☐	☐

Would you attend this event again?	
What is the biggest takeaway you gained from this event?	
Was there anything missing from the event?	



Do you have any specific feedback you would like to share with the organizer?	
Additional comments	