

## Your feedback is important! Please rate the program in these areas (circle one number):

| Importance of topic to university quality   |                | Low 1 | 2 3 4 5          | High |               |
|---|----------------|-------|------------------|------|---------------|
| Quality of panel presentations (content)  |                | Low 1 | 2 3 4 5          | High |               |
| Overall design of event   |                | Low 1 | 2 3 4 5          | High |               |
|   | Too short      |       | About right      |      | Too long      |
| Amount of time scheduled for presentations  | 1              | 2     | 3                | 4    | 5             |
| Amount of time scheduled for group discussions  | Too short<br>1 | 2     | About right<br>3 | 4    | Too long<br>5 |
|   | Too short      |       | About right      |      | Too long      |
| Amount of time scheduled for group reports  | 1              | 2     | 3                | 4    | 5             |
| Amount of time scheduled for  | Too short      |       | About right      |      | Too long      |
| break/refreshments  | 1              | 2     | 3                | 4    | 5             |
|   |                |       |                  |      |               |
|   |                |       |                  |      |               |
| Please list three important points you take away from today's presentations/discussions |                |       |                  |      |               |
| 1.  |                |       |                  |      |               |
|   |                |       |                  |      |               |
| 2.  |                |       |                  |      |               |
| 3.  |                |       |                  |      |               |
|   |                |       |                  |      |               |
|   |                |       |                  |      |               |
| Overall comments about the program/event:   |                |       |                  |      |               |
|   |                |       |                  |      |               |
|   |                |       |                  |      |               |
|   |                |       |                  |      |               |
|   |                |       |                  |      |               |
|   |                |       |                  |      |               |
| Please list your ideas for future tonics:   |                |       |                  |      |               |
| Please list your ideas for future topics:   |                |       |                  |      |               |
| 1.  |                |       |                  |      |               |
| 2.  |                |       |                  |      |               |
| 3.  |                |       |                  |      |               |

Please leave evaluation forms in the box at the front of the room. Thank you for your feedback!

Check One: CSUF Student \_\_\_\_ Faculty \_\_\_\_ Staff \_\_\_\_ Administrator \_\_\_\_ Other \_\_\_\_

## HARD COPY WILL BE DISTRIBUTED FOR COMPLETION AND RETURN AT THE END OF THE DAY. THANK YOU FOR YOUR PARTICPATION!