

Address:

Event Evaluation

[Event Name - Date]

Please take a moment to complete	this evaluation. Your	opinions are es	ssential for	r effective p	orograms i	n the future.	
Name:	Address Line 1:	Address Line 1:		Address Line 2 (if applicable):			
City:	State:		ZIF)·			
Phone Number:		Email Addre	SS:				
On a scale of 1 to 5, please circ	cle the number tha	t represents y	our opin	ion.			
	Strongly Agree				St	rongly Disagree	
1 The speaker was well informed	and interesting.	1	2	3	4	5	
2 The topic was timely and relevant.		1	2	3	4	5	
I learned something new from this presentation.		1	2	3	4	5	
4 The location is a good place to offer these programs.		1	2	3	4	5	
5 Overall, the event was worthwhile.		1	2	3	4	5	
I am interested in learning mo	ore about [FIRM NA	ME] and/or sch	neduling a	n introduc	tory meetir	ng.	
Please invite me to future edu	ucational events and	workshops.					
My company or organization	may be interested in	having a financ	cial profes	sional spe	ak at its ne	ext event.	
Contact:	Phone:						
Please invite a friend to future events on my behalf:	Name:		Ph	one:			

Carson Coaching | 13321 California Street | Dodge Plaza, First Floor | Omaha, NE 68154 | 800.514.9116 | carsongroup.com