WILLISTON STATE COLLEGE
EVENT EVALUATION FORM

Event: _______________________________________________
Date: _______________________________________________
Primary Event Organizer: _______________________________

1. Rate the success of the event (1: not successful; 10: very successful):
   1  2  3  4  5  6  7  8  9  10

2. What worked well?
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

3. Were there any unforeseen problems? Yes □ No □
   If yes, how could we prepare better in the future?
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

4. What would you like to see done differently if your event takes place here again?
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________
   ___________________________________________________________________

5. Rate the quality of the food (1: poor quality; 10: great quality):
   1  2  3  4  5  6  7  8  9  10

6. Rate the food selection (1: poor selection; 10: great selection):
   1  2  3  4  5  6  7  8  9  10

Submit completed form to: Christopher Kadrmas
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