

SPEAKER EVALUATION

To be completed by Club Program Chairman or Club Officer

Speaker Name: First _____ Last _____

Speaker Company/Organization: _____

Location of the Presentation: _____ Date: _____

Speaker Contact Information: (if already listed in our Directory, skip this section)

Email Address _____ Phone number _____

Street Address _____

City _____ State _____ Zip code _____

Title of Presentation _____

Type (Workshop, PowerPoint, Demo, etc.) _____

Fee Paid: \$ _____ Additional Expenses: _____

Most positive comment about this speaker's presentation: _____

Areas of concern or disappointment: _____

Did the speaker stick to the title? Yes _____ No _____

Was the topic interesting? Yes _____ No _____

Was the speaker on time? Yes _____ No _____

Were effective visual aids or handouts provided? Yes _____ No _____

What were they? _____

Would you recommend this speaker to other clubs? Yes _____ No _____

Additional Comment: _____

Your Name _____ Club Title _____

Your Club Name _____

Date of this Evaluation _____

Please Return to the Program Chair:
Or email her with questions:

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