[EVENT NAME]

[DATE/TIME]

[LOCATION]

**[ORGANISATION NAME]**

**EVENT FEEDBACK EVALUATION TEMPLATE**

*This template is a guide. Rearrange, edit, add or remove headings in each section to suit your event requirements. Document created and developed by [Full Name] on behalf of [Organisation Name].*

## BACKGROUND

*Event Title*

*Event Date/Time*

*Event Description*

## KEY PEROFORMANCE INDICATORS

|  |  |  |
| --- | --- | --- |
| KPI | Was it achieved? | Why or why not? |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

## STATISTICS

|  |  |  |  |
| --- | --- | --- | --- |
| Data | Expected | Actuals | Comments |
| Attendance |  |  |  |
| Budget |  |  |  |
| No of Participants |  |  |  |
|  |  |  |  |

## DEBRIEF FEEDBACK

Consider how you will organise debriefs and feedback. A combination of surveys, in-person meetings, on the spot questions and online sessions allows for a variety of stakeholders to provide feedback on the event.

|  |  |  |
| --- | --- | --- |
| Item | Event Elements | Comments/Recommendations |
| 1 | Venue and Infrastructure |  |
| 2 | Programming |  |
| 3 | Suppliers and Contractors |  |
| 4 | Human Resources |  |
| 5 | Communications and Marketing Plan |  |
| 6 | Budget Management |  |
| 7 | Community Engagement Plan |  |
| 8 | Accessibility and Inclusive Practices |  |
| 9 | Risk/Emergency Management Plan |  |
| 10 | General Communications – Internally |  |
| 11 | General Communications – Externally |  |
| 12 | Any Incidents |  |
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