

**Date: 26th – 27th August, 2019**

**Feedback/Evaluation Form**

**(Please, fill and send to info@nimport.net)**

*Write Your Name:………………………………………………………………………………………………..*

Organization:…………………………………………………………………………

Date:…………………………

**Instruction:** *Please indicate your level of agreement with the statements listed below in N0. 1-12*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| S/N |  | Strongly Agree | Agree | Neutral | Disagree | Strongly Disagree |
| 1 | The objectives of the conference were clearly defined. |  |  |  |  |  |
| 2 | Participation and interaction were encouraged. |  |  |  |  |  |
| 3 | The subjects covered were relevant to me. |  |  |  |  |  |
| 4 | The content was organized and easy to follow. |  |  |  |  |  |
| 5 | This conference experience will be useful in my work. |  |  |  |  |  |
| 6 | The facilitator was knowledgeable about the subject. |  |  |  |  |  |
| 7 | The conference objectives were met. |  |  |  |  |  |
| 8 | The time allotted for the conference  was sufficient. |  |  |  |  |  |

**9. Evaluate our speaker as: Excellent, …………Good, …………… Average, …………..**

**10. Please describe your knowledge of subject before and after the conference:**

Before:  Excellent  Good  Fair  Poor

After:  Excellent  Good  Fair  Poor

**11. The overall course:**

(a) Exceeded my expectations  (c) Almost met my expectations

(b) Met my expectations  (d) Failed to meet my expectations

**12. If you answered either (c) or (d) to question 17, what could we do to help meet your expectations?**

**13. Based on this experience, would you recommend this conference to a colleague?**

(a) Yes  (b) No  (c) Maybe

**14. What additional training would you like to suggest supporting the objective of the conference?**

**15. What was the conference highlight for you?**

**16. Do you see ways that the conference could be improved? If yes, please let us know how we can improve:**



