

Session Feedback

Session Feedback

Please take a moment and help us improve our event by filling out this form. Be sure to hand it in to a volunteer or at the registration desk for your chance to win prizes.

Your	name:								
Your	email:								
Pres	entation	title:							
Pres	enter na	ıme:							
Pleas	e rate th	ne follo	wing:	(1 = Po	oor and	110 =	Excelle	ent)	
1. Th	ie speak	er wa	s knov	vledge	able o	n the	topic p	oresen	ted:
1	2	3	4	5	6	7	8	9	10
2. Th	is sessi	on ma	tched	its de	scripti	on in	the pro	ogram	:
1	2	3	4	5	6	7	8	9	10
3. Th	ie speak	er wa	s clear	and v	well-or	ganize	d:		
1	2	3	4	5	6	7	8	9	10
4. Th	is sessi	on wil	II affec	t the v	way I v	vork:			
1	2	3	4	5	6	7	8	9	10
5. Th	ie overa	II ratir	ng of t	his se	ssion:				
1	2	3	4	5	6	7	8	9	10
Addi	tional c	omme	nts:						