

FOURTH ANNUAL ARTISTS CONFERENCE Evaluation Form

Thank you for attending our Fourth Annual Artists Conference! Please return this survey at the conclusion of the conference to share your valuable feedback. Your anonymous responses will be used to help shape next year's conference.

In general, how positive or negative have your interactions been with registering and receiving information about the conference? (please circle one)

Very Positive Positive Neutral Negative Very Negat	ive
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Overall, how satisfied or dissatisfied were you with sessions/presentations? (please circle one)

Very Satisfied Satisfied Neutral Dissatisfied Very Dissatisfied

Any suggestions on how to improve the schedule or timing of the conference?

Were you inspired after listening to the speakers? Did they help generate new ideas to incorporate into your practice or work? (please circle one)

Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
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How satisfied or dissatisfied were you about the content of all sessions? (please circle one)

Very Satisfied Satisfied Neutral Dissatisfied Very Diss	atisfied
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Which of the following best describes your preference for concurrent sessions at the conference? (please circle one)

Concurrent sessions so	No concurrent sessions with focused	No preference
attendees have options	topics of interest to everyone	



Would you be more likely to attend the conference if it were offered on a weekend? (please circle one)

Yes, I prefer weekend	No, I prefer weekday conferences	No preference
conferences		

For next year, what speakers, presenters, or panel session topics would you like to explore?

Please share any insights, reflections, or takeaways from the conference.