

Partner Survey

Survey Purpose: This instrument is designed to gather feedback from festival partners about their impression of an event after the event is over.

The following questions are related to your involvement in <insert event name here>. Please answer as honestly as you can.

Name: _____

Your Organization: _____

Description of Event:

1. Name of Event: _____
2. Approximately how many visitors did you serve at your exhibit/booth/presentation? _____
3. How many STEM professionals were working at your exhibit/booth/presentation? _____

Marketing/P.R.:

4. Did you market your event?
 Yes No
5. Are there any materials you wish you would have been provided with before the event in order to market your event more efficiently?
[open ended]

Ratings:

6. Overall, how would you rate the event?
 Poor Fair Good Very Good Excellent
7. Why did you select that rating?
[open ended]



8. How would you describe the level of communication you received from the <insert event name here> team?

	Not often enough	Adequate	Ideal (I had all the info I needed)	Too much/ Too often	N/A
Email Communications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In-Person Meetings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Program-Specific Meetings/Phone Calls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. How organized was the event?

- Extremely organized
 Very organized
 Somewhat organized
 Slightly organized
 Not at all organized

Outcomes:

10. How well do you feel that the <insert event name here> team prepared you/gave you adequate information in advance of the event?

- Very well, I had all of the information I needed
 Well
 Fairly well
 Not well at all, I was unprepared

11. Are there any other resources the <insert event name here> team can offer in the future to help improve the exhibit experience? (e.g. exhibitor guides, sample activities, trainings, etc.)

[open ended]

12. Did you meet your organization's goals by taking part in <insert event name here>?

- Yes
 No
 Not Sure

13. Please briefly describe your organization's goals for participating in <insert event name here>.

[open ended]

14. How would you rate the return on investment of your time and effort in this event?

- A great deal of value
 A lot of value
 A moderate amount of value
 Little value
 Almost no value at all



15. Please describe how *<insert event name here>* was worthwhile or not worthwhile to your organization or to you personally.
[open ended]

16. As a result of your past *<insert event name here>* experiences, did you make connections with others that have resulted in...?

	Yes	No	Not Sure
New partnerships and/or interactions with community groups.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
New professional collaborations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
New funding opportunities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
New events for this year's <i><insert event name here></i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final Feedback:

17. How effective do you feel your exhibit/activity was and why?
[open ended]

18. Based on your experience with this year's event(s), is your organization likely to participate in the next year's *<insert event name here>*?
 Yes No Maybe

19. Will you recommend that your colleagues be a part of *<insert event name here>*?
 Yes No Maybe

20. Please provide any final feedback you have for the *<insert event name here>* team.
[open ended]

