



# GOGEBIC COMMUNITY COLLEGE



## EVENT TECHNICAL EVALUATION FORM (TO BE COMPLETED BY EVENT REQUESTOR)



### Academic Quality Improvement Project

The Higher Learning Commission NCA

Name: \_\_\_\_\_

Group: \_\_\_\_\_

Event: \_\_\_\_\_

Date of event: \_\_\_\_\_ Room: \_\_\_\_\_

Room:

Comfortable temperature? \_\_\_\_\_

Comfortable seating? \_\_\_\_\_

Adequate Lighting? \_\_\_\_\_

Signal reception:

Clear video? \_\_\_\_\_

Clear audio? \_\_\_\_\_

Stable signal? \_\_\_\_\_

Technical Assistant?

Aloof? \_\_\_\_\_

Haughty? \_\_\_\_\_

Nerd-ish? \_\_\_\_\_

Rude? \_\_\_\_\_

Didn't even stay (was multi-tasking) \_\_\_\_\_

Would you do this again? \_\_\_\_\_

What, if anything, could be done to improve your event experience?

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(PLEASE RETURN THIS FORM TO WALT AS SOON AS FEASIBLE AFTER THE  
EVENT – HE WILL HOUND YOU FOR IT IF YOU DON'T)