



## Ministry After-Event Evaluation Form

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Duration of Event: \_\_\_\_\_

Brief Description of Event: \_\_\_\_\_

Age group for this event: \_\_\_\_\_

Cost of the event: \_\_\_\_\_

Number of planned participants: \_\_\_\_\_

Actual number of participants: \_\_\_\_\_

Advertisement Used:  Bulletin Announcement  Video Announcement  Flyer

Other If other, explain: \_\_\_\_\_

If your event was cancelled, please give thorough explanation (i.e. budget, weather, lack of interest):

\_\_\_\_\_  
\_\_\_\_\_

Do you believe the event was a success?  Yes  No Explain Answer: \_\_\_\_\_

\_\_\_\_\_

What future steps would you take to create more interest in your event? \_\_\_\_\_

\_\_\_\_\_

Do you think that if this event coincided with another event it would generate a greater response towards participation? \_\_\_\_\_

\_\_\_\_\_

In your own words explain the significance of continuing this event or doing something of a more significant nature: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Pastor Signature

Please submit to [forms@copim.org](mailto:forms@copim.org)

*Cathedral Of Praise International Ministries*  
3030 N. Del Rosa Ave. San Bernardino, CA 92404  
Ph: (909) 474-1005 ~ Fax: (909) 474-9798