

Conference Title

CONFERENCE/SEMINAR MONITORING AND EVALUATION FORM



COUNCILLORS

This overview will be submitted to the next meeting of the Council Business Committee.

Councillor's Name						
Date						
1. Were the objectives of the event met?						
Please comment and provide details of the objethey were met, or not met and why. If they were e				e) and how		
2. Benefits to you and the Council						
*Please comment on how you feel the event benefitted you as a community representative/leader and decision-maker.						
3. The time allocated for the event was (please tick box):						
Too much* Sufficient Too little*						
*Please comment and provide details of how the duration of the event could be improved.						
4. Please rate the relevance of the event (please tick box):						
	Excellent	Good	Average	Poor		
Relevance of the event						

5.	Please give your feedback on the event, particularly whether you think it provided value for money and any matters that would be of interest to fellow Councillors.				
	Will you be sharing the couplease tick box)?	ourse materials and what you have learnt with other Councillors			
		Yes			
		No			
•	Would you recommend t	his event to other Councillors (please tick box)?			
		Yes			
		No			
	Diagonal automonalditi				
•	Please set out any addition	onal comments you may have about the event in the space below.			

Thank you for completing this Monitoring and Evaluation Form