# Program Evaluation Form

At Anytown Public Library, we continually strive to improve our programs.

Your input into the program you recently attended will assist us with this process.

Program Location:

Branch XXX

Branch XXX

Branch XXX

Program Attended: Presenter’s Name:

Your Name (optional): Phone or email:

Please indicate your level of satisfaction with each of the following:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Program met my expectations | *poor* | *fair* | *satisfactory* | *good* | *excellent* |
| Program content | *poor* | *fair* | *satisfactory* | *good* | *excellent* |
| Ability of presenter to communicate content | *poor* | *fair* | *satisfactory* | *good* | *excellent* |
| Content and usefulness of handouts | *poor* | *fair* | *satisfactory* | *good* | *excellent* |
| Area in which program was held | *poor* | *fair* | *satisfactory* | *good* | *excellent* |
| Convenience of program day and time | *poor* | *fair* | *satisfactory* | *good* | *excellent* |
| Overall, how would you rate this program | *poor* | *fair* | *satisfactory* | *good* | *excellent* |

If you answered “poor” or “fair” to any of the above please indicate your reasons:

Did you use library resources or check out material as a result of this program?

*Yes No*

Would you recommend this program to friends or family? *Yes No*

How did you hear about this program?

What changes, if any, would you recommend for this program?

Do you have any suggestions for future programs?

If you would like to be informed of upcoming events, please give us your name and address.

Name Address:

City State Zip Code

Thanks for providing your feedback!

**Please take a few minutes to evaluate this program.**

# Leave your evaluation sheet at the library. Thanks!

***Staff: Please send completed forms to (Name of Program Organizer Here)***

1. Title of program you attended
2. Location where you attended the program
3. Do you have an Anytown Public Library card?
   * yes □ no
4. Have you ever attended a program at APL before?
   * never □ once □ more than 3
5. How did you hear about this program (check all that apply)?

* library newsletter □ postcard mailing
* newspaper advertisement or article □ poster or bookmark

□ radio advertisement

1. Overall, how would you rate today’s program?

□ poor □ fair □ good □ excellent

1. How would you rate the program’s usefulness or enjoyment value?

□ poor □ fair □ good □ excellent

1. Would you come to another program at the library? □ yes □ no
2. What is the best day of the week and time of day for you to attend library programs?
3. Suggestions for future program topics:

If you would like to be informed of upcoming events, please give us your name and address.

Name: Address: City: State Zip Code