

## **NCEMSF CONFERENCE EVALUATION FORM**

Thank you for your attendance. Your feedback is extremely important. Please complete this evaluation form and return it to the registration desk or to a conference staff member. See you at Conference 2005!

- Scale: (1) Strongly Disagree or Poor  
 (2) Disagree or Fair  
 (3) Neutral  
 (4) Agree or Good  
 (5) Strongly Agree or Excellent

**Pre-Arrival:**

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| Online registration was simple, fast and efficient: | 1 | 2 | 3 | 4 | 5 |
| Payment options/policies were clear and fair:       | 1 | 2 | 3 | 4 | 5 |
| Advertising/online information was adequate:        | 1 | 2 | 3 | 4 | 5 |
| Responsiveness of conference staff to questions:    | 1 | 2 | 3 | 4 | 5 |

Comments:

**Arrival:**

|  |   |   |   |   |   |
|--|---|---|---|---|---|
| Check-in procedure was simple, fast and efficient: | 1 | 2 | 3 | 4 | 5 |
| Registration materials were informative:           | 1 | 2 | 3 | 4 | 5 |

Comments:

**Conference Location/Facility:**

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| Accessibility of location:                      | 1 | 2 | 3 | 4 | 5 |
| Size of facility:                               | 1 | 2 | 3 | 4 | 5 |
| Hotel accommodations/guest rooms:               | 1 | 2 | 3 | 4 | 5 |
| Cost of lodging was reasonable:                 | 1 | 2 | 3 | 4 | 5 |
| Parking was accessible and cost was reasonable: | 1 | 2 | 3 | 4 | 5 |

Comments:

**Lectures:**

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| Educational content:                    | 1 | 2 | 3 | 4 | 5 |
| Relevance to certification level:       | 1 | 2 | 3 | 4 | 5 |
| Relevance to Campus Based EMS practice: | 1 | 2 | 3 | 4 | 5 |
| Handouts/take home materials:           | 1 | 2 | 3 | 4 | 5 |
| Time for Q&A/discussion:                | 1 | 2 | 3 | 4 | 5 |
| I learned something new/helpful/useful: | 1 | 2 | 3 | 4 | 5 |

Comments:

**Conference Speakers/Presenters:**

|                                   |   |   |   |   |   |
|-----------------------------------|---|---|---|---|---|
| Knowledge of subject matter:      | 1 | 2 | 3 | 4 | 5 |
| Quality of presentation/delivery: | 1 | 2 | 3 | 4 | 5 |
| Use of audio/visual equipment:    | 1 | 2 | 3 | 4 | 5 |
| Responsiveness to questions:      | 1 | 2 | 3 | 4 | 5 |

Comments:

**Skills Competition:**

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| Skills competition was well organized:        | 1 | 2 | 3 | 4 | 5 |
| Skills competition rules were clear and fair: | 1 | 2 | 3 | 4 | 5 |
| Skills competition judging was fair:          | 1 | 2 | 3 | 4 | 5 |

Comments:

**Social Activities:**

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| There was sufficient time to meet other schools:    | 1 | 2 | 3 | 4 | 5 |
| Conference encouraged social interaction/networking | 1 | 2 | 3 | 4 | 5 |
| Friday night Pizza Party yielded new friends:       | 1 | 2 | 3 | 4 | 5 |

Comments:

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| Saturday Evening:                                     | 1 | 2 | 3 | 4 | 5 |
| I enjoyed having the night to explore a new City:     | 1 | 2 | 3 | 4 | 5 |
| Sufficient options/directions were presented to me:   | 1 | 2 | 3 | 4 | 5 |
| I was happy to get out of the hotel after a long day: | 1 | 2 | 3 | 4 | 5 |

Comments:

|  |   |   |   |   |   |
|--|---|---|---|---|---|
| Food:  | 1 | 2 | 3 | 4 | 5 |
| Pizza Party (Friday Night)                       | 1 | 2 | 3 | 4 | 5 |
| Breakfast (Saturday and Sunday Mornings)         | 1 | 2 | 3 | 4 | 5 |
| Snack Break (Saturday Afternoon)                 | 1 | 2 | 3 | 4 | 5 |
| Lunch/Dinners options on my own were sufficient: | 1 | 2 | 3 | 4 | 5 |

Comments:

|   |   |   |   |   |   |
|---|---|---|---|---|---|
| Overall Conference:                                   | 1 | 2 | 3 | 4 | 5 |
| The schedule was full and there was plenty to do:     | 1 | 2 | 3 | 4 | 5 |
| There was adequate choice in programming:             | 1 | 2 | 3 | 4 | 5 |
| There was ample downtime/breaks:                      | 1 | 2 | 3 | 4 | 5 |
| Conference staff was helpful and responsive:          | 1 | 2 | 3 | 4 | 5 |
| The cost with respect to the experience was worth it: | 1 | 2 | 3 | 4 | 5 |
| I feel my attendance was worthwhile:                  | 1 | 2 | 3 | 4 | 5 |
| I would attend future NCEMSF Conferences:             | 1 | 2 | 3 | 4 | 5 |
| I would recommend future conferences to others:       | 1 | 2 | 3 | 4 | 5 |

Comments:

Is there anything you would like to see at a future conference that was not included in this year's conference? Please list.

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If you answered "Yes" above, how much are the items listed worth to you? How much extra might you be willing to spend in registration fees?

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Any additional comments/suggestions/constructive criticism? Please let us know.

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Name and school (optional):

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Please mail completed form to:  
 NCEMSF  
 PO Box 113  
 Delmar, NY 12054-0113