OLLI EVALUATION: CINEMA

Thank you for evaluating this event. Staff and committee volunteers review this information, and your feedback and comments will be taken into consideration for future program planning.

1) Rate the total experience of this cinema event.
   □ Excellent □ Good □ Fair □ Poor

2) Rate the customer service of the Continuing Education staff who support OLLI programs.
   □ Excellent □ Good □ Fair □ Poor

3) Rate the registration process which includes your confirmation materials.
   □ Excellent □ Good □ Fair □ Poor

4) Rate the educational quality of this cinema event.
   □ Excellent □ Good □ Fair □ Poor

5) Considering your expectations, how much did you learn?
   □ A lot □ Quite a bit □ Some □ Nothing

6) What is your assessment of the cinema event transportation (if provided)?
   □ SATISFACTORY □ NOT SATISFACTORY
   Please explain your response: __________________________________________________________

7) What is your assessment of the meal during the cinema event (if applicable)?
   □ SATISFACTORY □ NOT SATISFACTORY
   Please explain your response: __________________________________________________________

8) The moderated discussions were:
   □ ENGAGING/ INTERESTING □ TOO DULL/ UNINTERESTING

9) The cinema moderator(s) was easy to understand and clearly explained the educational content provided.
   □ Strongly Agree □ Agree □ Disagree □ Strongly Disagree

10) The cinema moderator(s) effectively managed questions, discussions and debates, and encouraged participation.
    □ Strongly Agree □ Agree □ Disagree □ Strongly Disagree

Please complete the reverse side of this sheet.
11) The cinema event met the description in the OLLI program brochure.
   □ Strongly Agree   □ Agree   □ Disagree   □ Strongly Disagree

12) I would recommend this cinema moderator(s) to a personal friend.
   □ Strongly Agree   □ Agree   □ Disagree   □ Strongly Disagree

13) I would recommend this cinema event to a personal friend.
   □ Strongly Agree   □ Agree   □ Disagree   □ Strongly Disagree

14) Please write one thing you like most about this cinema event.

________________________________________________________________________

15) Please write one thing you would change about this cinema event.

________________________________________________________________________

16) What is your assessment of the room(s) in which this cinema event was held?
   □ SATISFACTORY   □ NOT SATISFACTORY

   Please explain your response: ____________________________________________

17) How did you hear about this cinema event? If your answer is the OLLI program brochure, where did you get it?

________________________________________________________________________

18) What ideas for new cinema events can you offer? Can you suggest a moderator?

________________________________________________________________________

19) What OLLI member or cinema event moderator deserves to be recognized with an OLLI lapel pin? And why?

________________________________________________________________________

Are you willing to help with cinema events (for example, design a cinema event, be a moderator, be a host for a cinema event, etc.)? If yes, please give your name to a staff member.

If you would like to receive the OLLI weekly e-mail newsletter and the OLLI program brochure in the mail, please contact a staff member and provide your name, street address, and e-mail address.