



NH Humanities Council Program Host Evaluation

Humanities to Go Program # _____

Please complete this survey and return it to the Humanities Council along with the audience evaluations. Your input will assist us in ensuring the highest quality programming possible.

Your Name: (Please Print) _____

Organization Name: _____

Job Title: _____ E-mail address: _____

Date of program: _____ Presenter name: _____

Program title: _____

Location: _____

Number of attendees: _____ ***This field is mandatory and must be filled in. Attendance information is vitally important to the Humanities Council and required for our reporting obligations.***

Please check the statement that best describes the interaction at the program.

- a. The speaker engaged the audience in a lively discussion/Q and A.
- b. The speaker took some time to solicit questions from the audience, with GOOD response.
- c. The speaker took some time to solicit questions from the audience, with FAIR response.
- d. The speaker took some time to solicit questions from the audience, with POOR response.
- e. The speaker made no attempt to engage the audience in any discussion.

Participants were visibly interested and engaged in the program.

- Yes
- No

Did you find this program personally interesting and engaging?

- Yes
- No
- Comments? _____

The program attracted people who had not been to your organization prior to the event.

- Yes
- No
- Not sure

Why did your organization choose to host this program? Check all that apply.

- Interesting subject/topic
- Speaker
- Other (please specify) _____

Please describe any obstacles you faced in organizing or carrying out this Humanities to Go program, including any challenges with NHHC and/or the speaker: _____

Thank you!