



As part of our commitment to a quality festival and ongoing development for future years, we ask that you please take a few moments to complete this evaluation. Use the scale below when rating.

RATING	Poor	Below Average	Average	Good	Excellent
	1	2	3	4	5

1. What was your overall impression of the festival?

Rating  Comments? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2. What was your overall impression of the preparation for the festival by the committee e.g. Website, section criteria, performance times

Rating  Comments? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

3. What was your overall impression of the organisation involved throughout the actual festival, e.g. warm-up rooms, movement to stage, stage set up, food outlets

Rating  Comments? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

4. How effective were the adjudicators' comments in assisting you to evaluate your group's performance?

Rating  Comments? \_\_\_\_\_  
 \_\_\_\_\_

5. How would you rate the venue in which you performed?

Rating  Venue \_\_\_\_\_  
 Comments? \_\_\_\_\_  
 \_\_\_\_\_

6. What were the 2 most beneficial experiences of the festival?

1. \_\_\_\_\_

2. \_\_\_\_\_

7. What were the 2 least beneficial experiences of the festival?

1. \_\_\_\_\_

2. \_\_\_\_\_

8. What 2 recommendations would you make for future festivals?

1. \_\_\_\_\_

2. \_\_\_\_\_

9. Would you recommend this festival to others?

YES

NO

Additional Comments:

**OPTIONAL: Name:.....**

**School: .....**

Please leave this survey at the Secretaries desk or post to

QCMF Facilitator  
Villanova College,  
P.O. Box 1166  
**COORPAROO. DC. Q. 4151**