

Attendee Program Evaluation: Tim Connor

Your Name: _____

Your comments on my presentation are greatly appreciated. It is my objective to ensure the highest quality presentations delivered in a professional manner. Thank you for taking a few minutes to provide me with your feedback.

Program Content: (Poor) 1 2 3 4 5 6 7 8 9 10 (Excellent)
Please circle

Program Presenter: (Poor) 1 2 3 4 5 6 7 8 9 10 (Excellent)
Please circle

Overall Rating of this program: (Poor) 1 2 3 4 5 6 7 8 9 10 (Excellent)
Please circle

What was one idea that you got out of today's program of value:

What did you like best about the program:

What would you like to see changed in future programs:

Would you like Tim to call you to discuss a presentation for your organization: YES _____

Would you like your organization to bring Tim back for a future presentation: YES _____

If yes what topics would interest you:

Please contact me: (ASAP Next 30 days Next 6 months) about:

Training and education materials Consulting A meeting keynote
 A Custom in-house seminar

Have I got a lead for you: Please contact the following and please use my name as a reference.

NAME: _____ **TEL NO:** _____

ORGANIZATION: _____ **POSITION** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____ **E MAIL:** _____

Tim Connor, CSP, Connor Resource Group Box 397 Davidson, NC 28036 800-222-9070
email: speaker@bellsouth.net website: www.timconnor.com