



IP-MED Final Conference Evaluation Form

23/03/2017

Please help us make our conferences better next years by filling out this short questionnaire.

	very satisfied	satisfied	very dissatisfied
1. Please rate your overall satisfaction with the conference.			
2. Please rate your overall satisfaction with the exhibits area.			
3. Please rate your overall satisfaction with the format of the conference (i.e. morning sessions, breaks, lunch, and afternoon sessions/breakouts).			
4. Please rate your overall satisfaction with the reception and breaks:			
5. Please rate your overall satisfaction with the facilities.			
6. Please rate your overall satisfaction with the location of the conference.			
7. Overall, based on your total experience at the conference, will you attend or recommend someone else attend our new conferences?			

8. Please provide any comments you have on future conference locations, topics, speakers or general suggestions regarding the conference: