



2009 CUES XXXXX Council Meeting **Evaluation**

Dates:

Please indicate your overall satisfaction with this program.

| | Very Satisfied | Somewhat Satisfied | Dissatisfied |
|----------------------|----------------|--------------------|--------------|
| Registration Process | | | |
| Program Materials | | | |
| Program Content | | | |
| Venue | | | |
| Food & Beverage | | | |

How did you hear or learn about this program?

- Invitation
- Email
- Web Site
- Referral

Please select the main reason for attending this program (choose only one):

- Program Content
- Networking
- Personal/Professional growth & development

Did the program fulfill your reason for attending?

- Yes
- No – Suggestions for improvement: _____

What month do you prefer we hold the meeting?

- January - April
- May - August
- September - December

Will you recommend this program to fellow Council members?

- Yes
- No

Program Speaker: XXXXX

| | Strongly Agree | Agree | Disagree |
|---|----------------|-------|----------|
| Knowledgeable about subject matter | | | |
| Effective presentation skills | | | |
| Made program material relevant | | | |
| Concerned about our learning experience | | | |

What kind of topics would you like to see included at future Council Meetings?

What are you taking back to your credit union to implement from this program?

What did you learn about the role CUES and the council can play in helping you?

What can CUES do more of or better to make your credit union more successful?

Signature: (Optional) _____

Credit Union: _____