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QUESTIONNAIRE FOR THE EVALUATION OF EVENTS EVENT NAME

EVENT NAME	To be completed by partner institutions before distribution
HOSTING PARTNER	To be completed by partner institutions before distribution
HOSTING COUNTRY	To be completed by partner institutions before distribution
DATE(S)	To be completed by partner institutions before distribution

Your opinion is important for us. Please take a few minutes to complete this short questionnaire about the event in which you just took part within the framework of UP&UP, in order to help us improve future activities. Thank you!

1. For each statement, please mark with an X the most appropriate answer according to your opinion.

	1 Insufficient	2 Sufficient	3 Good	4 Very good
The overall organisation of				
the event was				
The organisation of				
logistical and practical				
aspects was				
The agenda of the event				
was				
The contents of the				
different sessions were				
The materials distributed				
were				

2. Please also give us your opinion about UP&UP project.

	1 Insufficient	2 Sufficient	3 Good	4 Very good
	mounteicht	Junicient	0000	Verygood
The project and its				
objectives are				
The activities developed				
thus far are				
The results achieved thus				
far are				
The methodology used is				

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3. Other comments, suggestions and/or recommendations for improvement.

Would you like to follow project activities? Please leave us your contact details and we will include you in our mailing list. Please remember to write your details <u>clearly and in caps lock</u>.

Your name	
Your institution	
Country	
E-mail address	

Thank you for your cooperation!