

IACAC COLLEGE FAIR EVALUATION FORM

Name of fair: _____

Date of fair: _____ Time of fair: _____

- Rating System:
- 5 – Excellent
 - 4 – Very Good
 - 3 – Good, Normal, Satisfactory
 - 2 – Fair, Substandard, Some Difficulty
 - 1 – Poor, Unacceptable, Very Low, Ineffective
 - NA – Not Applicable, Unsure

For Ratings of 1 or 2 PLEASE make comments.

Organization & Program	5	4	3	2	1	N/A	Comments
<i>Invitation Information</i>							
<i>Confirmation Materials/Directions</i>							
<i>On-Site Information/Assistance</i>							
<i>Length of Fair</i>							Too Long Too Short Adequate
<i>Date and Time of Fair</i>							
<i>Location of Table</i>							
<i>Facility Size and Location</i>							
<i>Student Participation</i>							
<i>Parent Participation</i>							
<i>Overall Evaluation</i>							

Strengths of Program: _____

Suggestions for Improvement: _____

Estimated Number of Student Contacts: _____

Name of Person Completing Form (Optional): _____

Name of Organization You're Representing (Optional): _____