Pre-Event Questionnaire

Please complete and return to:

Yolanda M. Owens ◆ P.O. Box 11471 ◆ Burke, VA 22009

Email: yolandamowens@gmail.com

This questionnaire will allow Yolanda to have a better understanding of your group and aid in event preparation.

Event Contact Information:

| Comback Douglas | | T:+1 | | | |
|--|-------------------------|---------------------|------------|--|--|
| Contact Person: | | Title: | | | |
| Association/Company/School: | | | | | |
| Phone #: | | Cell #(in case of e | mergency): | | |
| Date of the Event: | | | | | |
| Event Information: | | | | | |
| What is the specific purpose of t | this event? | | | | |
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| What are your specific objectives for a presentation? | | | | | |
| what are your specific objectives for a presentation: | | | | | |
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| Are there any consitive issues th | Shahiove ad blunds te | □Yes □No | | | |
| Are there any sensitive issues that should be avoided? \(\begin{align*} \Pi \) Yes \(\begin{align*} \Pi \) No \(\begin{align*} If yes, please note issues below. \end{align*} | | | | | |
| ly yes, pieuse note issues below. | | | | | |
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| Event Logistics: | | | | | |
| Name & Title of my introducer: | | | | | |
| Timeframe for presentation: | Start: | | End: | | |
| Will there be a break? ☐Yes | □No If Yes, appr | oximate time: | | | |
| What takes place immediately before and after my presentation (i.e. another speaker, meals break, class, etc.?) | | | | | |
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| Who are the other speakers on t | the program with me (if | anv)? | | | |
| Speaker: | | Горіс: | | | |
| Speaker: | | Горіс: | | | |
| Speaker: | | Горіс: | | | |
| -1x | | - 14.000 | | | |

Event Dynamics: What **professional speakers** have you used in the past and what did they cover? Speaker: Topic: Speaker: Topic: Speaker: Topic: What did you specifically like/dislike about their performance? Why? (Feel free to withhold names and only comment on their performance) Do you have any **special suggestions** to help make this program your best ever? **Audience Information:** Approximate # attendees: Range of age: Average age of group: Majors: Year of study (Frosh, Sophomore, Junior, Senior, Master, MBA, PhD): Additional information I should know about the audience: Tell me about your Group/Organization/Association/Company:

| What are the three main things you think I should know about your group? | |
|---|--|
| 1. | |
| 2. | |
| 3. | |
| What are the biggest job search challenges being faced by your group? | |
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| What areas would your group most like to improve regarding their job searches? | | | |
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| What's the most effective way to communicate with/present to your group? | | | |
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Thank you for your assistance!