

# TECH WEEK\_2019

Name of Event + Location \_\_\_\_\_

Thank you for participating in this event, we hope you had fun!  
Please take just a moment and tell us what you thought of the event.

### 1. Are you a ....?

|                      |                      |                      |                      |                      |
|----------------------|----------------------|----------------------|----------------------|----------------------|
| Primary Student      | Secondary Student    | Teacher              | Parent               | Other                |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

### 2. How did you hear about the event?

|                      |                      |                      |                      |                      |
|----------------------|----------------------|----------------------|----------------------|----------------------|
| Tech Week Website    | Poster / Flyer       | Friends or Family    | Newspaper/ Radio     | Teacher/ School      |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

### 3. Which of these words best describe the event?

|                      |                      |                      |                      |                      |
|----------------------|----------------------|----------------------|----------------------|----------------------|
| Fun                  | Exciting             | Informative          | Interesting          | Boring               |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

### 4. Was the Technology content at the event..

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| Too Hard             | Just Perfect         | Too Easy             |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

### 5. Would you attend an event like this in the future?

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| Yes                  | No                   | Don't Know           |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

### 6. How did/do you feel about Technology:

Before this event?



After this event?



### 7. Any other comments you wish to make?

Thank you for your participation.

