

# Resident Event and Activity Evaluation Form

Please fill out this evaluation form to help us improve future community events and activities. Since this form is designed for printing, please write your responses clearly in the spaces provided.

## General Information

Event/Activity Name:

Date of Event:

Resident Name (Optional):

Apartment/Unit Number:

## Event Feedback

Overall Rating (Excellent / Good / Average / Poor):

What did you enjoy most about this event or activity?

What improvements, if any, would you suggest for next time?

Was the date and time of the event convenient for you? (Yes / No - Please explain):

What other types of events or activities would you like to see in the community?

Additional Comments / Suggestions: