

ARCHIVES/CHICAGO 2007 EVALUATION FORM

- 1. How would you rate the overall quality of the Annual Meeting sessions? (Please circle your response; 1 = poor, 5 = excellent.) 1 2 3 4 5
- 2. Which session did you enjoy most? Session # _____ Why?____
- 3. Which session did you enjoy least? Session # _____ Why? _____
- 5. In general, how would you rate the overall quality of the meeting as an opportunity to network? (*Please circle your response*; 1 = poor, 5 = excellent)
 1 2 3 4 5
- 6. Did you attend the Exhibit Hall? Yes ____ No ____ If yes, approximately how much time did you spend in the Hall? _____ How would you rate the quality of the contacts that you made in the Exhibit Hall? (*Please circle your response*; 1 = poor; 5 = excellent)
 1 2 3 4 5
- 7. Were there any companies absent from the Exhibit Hall that you wished to have seen? If yes, please list:
- 8. What could be done differently to enhance your SAA Annual Meeting experience?

THANK YOU for your response. It will make a difference. Please return this form to the SAA Registration Desk or to the SAA office at 527 South Wells Street, Fifth Floor, Chicago, IL 60607; fax 312-347-1452.