

STUDENT LIFE | IU South Bend

Social Event Evaluation Form

In an effort to provide student organizations with the best service possible, we want to know about your experience with your social event. Please give us your honest evaluation. Thanks!

Club/Organization: _____ Date of event: _____ Time: _____

Estimated number of attendees: _____ Students _____ Guests

1. The Grille worked well for our social event _____ Yes _____ No
2. Was the event properly set up and ready? _____ Yes _____ No
3. Was the staff professional and easy to work with? _____ Yes _____ No
4. Were your security needs met? _____ Yes _____ No
5. Were all of your catering items as you ordered them? _____ Yes _____ No _____ NA

With 10 being highest, how would you rate your experience? 1 2 3 4 5 6 7 8 9 10

Any comments, feedback or suggestions?

*Please return this form to the Student Life Office
Room 201 of the Student Activities Center
within seven (7) days of your event. Thank you.*