



Adult Evaluation

We hope you have enjoyed the event! PLEASE TELL US WHAT YOU THOUGHT – personal information will be used for statistical purposes only by Business & Education South Yorkshire and Yorkshire Forward to help us with the project. **Thank you!**

Event name:	Location:	Date:
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About you:		
First name:	Last name:	Age or DoB:
Which school are you with?		<i>Please tick ✓</i>
		Teacher?

1.a.) How much have you enjoyed this event? (please tick one box on each question ✓)

Not at all	Some of it	Mostly	Very

1.b.) What was the best thing about the event?

2.) Was the activity interesting?

Not at all	Some of it	Mostly	Very

3.) Did you enjoy the activity?

Not at all	Some of it	Mostly	Very

4.) Do you generally enjoy science and technology topics?

Not at all	Some of it	Mostly	Very

5.) Do you think science and technology are important?

To you

Not at all	Sometimes	Mostly	Very

6.) **To the world**

Not at all	Sometimes	Mostly	Very

Thank you – please could you hand in this form at the end of the day!