



# SPEAKER/SEMINAR EVALUATION

Please complete and return this form to the table in the session room, or at the AAM Registration Desk.

**PLEASE CHECK THE BOX FOR THE SESSION TITLE YOU ATTENDED:**

**Thursday, June 4, 2009**  
**'C' Sessions: 10:30 – 11:45 a.m.**

- C1: Proposing to Win – Tom Sant
- C2: Video Killed the Radio Star – Burkey Belser & Joe Walsh
- C3: Retaining Top Gen Xers – Wendy Nemitz
- C4: How the C-Suite Buys Professional Services – Russ Molinar

**Please circle one response to each question.**

- |  |        |        |      |               |
|--|--------|--------|------|---------------|
| 1. Did you learn something that you can use/apply from this presentation?                                    | Yes    | No     |      |               |
| 2. Is this subject important to you professionally?  | Yes    | No     |      |               |
| 3. Would you like to see this topic again at future meetings?  | Yes    | No     |      |               |
| 4. Would you like to see this speaker(s) again at future meetings?   | Yes    | No     |      |               |
| 5. How well did the presenter(s) communicate the information?  | Poorly | Fairly | Very | Exceptionally |
| 6. How well did the presenter(s) demonstrate mastery of the topic?   | Poorly | Fairly | Very | Exceptionally |
| 7. How well did the content of the session match the description of the sessions provided in the literature? | Poorly | Fairly | Very | Exceptionally |
| 8. Was the time allotted for learning appropriate?   | Yes    | No     |      |               |
| 9. Were facilities and/or technological equipment appropriate?   | Yes    | No     |      |               |
| 10. Were the handout or advance preparation materials satisfactory?  | Yes    | No     |      |               |
| 11. Were the audio and video materials effective?  | Yes    | No     |      |               |

Additional comments:

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I would like to receive CPE Credit for attending this session. (Contact information is required for CPE credit)

Please print:

Name: \_\_\_\_\_ Company: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, ZIP, Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Signature: \_\_\_\_\_

Completed evaluations and attendance forms must be signed for CPE credit.

**Evaluations can also be taken online at [www.accountingmarketing.org](http://www.accountingmarketing.org)**