**EVENT DEBRIEF AND EVALUATION FORM**

|  |  |
| --- | --- |
| **Name of Event:** |  |
| **Date of Event:** |  |
| **Name:** |  |
| **Organisation:** |  |
| **Responsibility:** |  |

|  |
| --- |
| **List or describe what you thought was successful or worked well in the area you were responsible for or involved in:** |
|  |

|  |
| --- |
| **List or describe what you thought was NOT successful or did not work well in the area you were responsible for or involved in:** |
|  |

|  |
| --- |
| **List your actions / recommendations for improvement for future events for the area you were responsible for or involved in:** |
|  |

|  |
| --- |
| **List or describe what you thought was successful or observed working well it he whole event:** |
|  |