Date	Program Evaluation
Email address	
Date/Time of the broadcast	
Name of the Host/Program	
Topic	
On a scale of 1-5: (5=Best, 1=Worst) was the Program:  On a scale of 1-5: (5=Best, 1=Worst) was the Host	
Engaging?	Passionate?
Organized?	Well prepared?
Well prepared?	Enthusiastic?
Educational?	Knowledgeable?
Rate the following on a scale of 1-5 (5=Best, 1=Worst)	
Overall Flow of the Show?	Smooth Transitions?
Overall Appeal?	Overall Quality?
Were PSAs Aired?	Was our Website Promoted?
What did you like?	
What did you NOT like?	
How did the Program adhere to Mission Statement?	
What would you like to change?	
Additional Comments?	