

**Evaluation Form**

**Event Title:**  
**Date/Location:**

	Disagree			Agree	
1. The <b>length of time</b> was appropriate	1	2	3	4	5
2. The presentations provided new ideas	1	2	3	4	5
3. I would attend a similar event / program	1	2	3	4	5
4. Overall, this presentation met my expectations	1	2	3	4	5

**How did you learn about this symposium?**

Email     Friend     US Mail     Group/Organization     Media: \_\_\_\_\_     Other

**What influenced your decision to attend?**

**Please let us know your thoughts on the presentations and how you benefited from this event. Were they interesting? Useful? (use the back if needed)**

**What new insights, if any, about gender, art, and the Fertile Crescent did the presentations provide?**

**How did this program affect your view of the gender and the Middle East and help you understand its cultures and complexities? \_\_\_\_\_ Not at All \_\_\_\_\_ Somewhat \_\_\_\_\_ A great deal (use the back if needed)**

**Have you attended other Fertile Crescent events?  yes  no. Which ones?**

**Have you visited any of the exhibitions? If so, which venues? Please provide any comments.**

**If you would like to be added to the Institute for Women and Art mailing list for future events please provide us with your name and email address below. *Please write legibly.***

**(Additional questions on back of sheet)**

**Please complete and return this form by December 1 to: Institute for Women and Art, 191 College Ave-2nd Fl, New Brunswick, New Jersey 08901.**

Thank you for taking the time to give us your feedback!

Voluntary Information:

Gender: F M Other: \_\_\_\_\_

I am: Faculty Staff Student General Public: \_\_\_\_\_

Affiliation: Rutgers U Princeton U Other school: \_\_\_\_\_ NJ resident Other: \_\_\_\_\_  
School/Dept/ \_\_\_\_\_

City/State of residence/zip code: \_\_\_\_\_

Country of origin \_\_\_\_\_

Thank you for taking the time to give us your feedback!