Thank you for attending our Spring Meeting. We’d like to hear your impression of the various aspects of the meeting so that we can continually improve the experience for all attendees.

1. **Overall how would you rate the meeting?**
   - □ Excellent
   - □ Good
   - □ Neutral
   - □ Poor
   - □ Left much to be desired

2. **What did you like best about this meeting?**  *Check no more than two.*
   - □ Content within the meeting
   - □ Platform session
   - □ Short courses
   - □ Poster session
   - □ Location
   - □ Venue
   - □ Social aspect of the meeting
   - □ Food
   - □ Length of the meeting
   - □ Other ________________________________

3. **What did you like least about this meeting?**  *Check no more than two.*
   - □ Meeting theme
   - □ Platform session
   - □ Short courses
   - □ Poster session
   - □ Location
   - □ Venue
   - □ Social aspect of the meeting
   - □ Food
   - □ Length of the meeting *Circle one:* (too long/too short)
   - □ Other ________________________________

Optional: To be contacted

Please provide NAME, AFFILIATION, EMAIL ADDRESS

Thank You for your responses!
4. Was there one part of the meeting (e.g. short courses, platform session, poster and/or platform session, etc.) that ‘made’ you come to this meeting?

□ Yes (specify__________________________________________________________)
□ No

5. Please rate the following aspects of the meeting organization

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<th>Excellent</th>
<th>Good</th>
<th>Neutral</th>
<th>Poor</th>
<th>Terrible</th>
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<tbody>
<tr>
<td>Schedule and timing</td>
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<td>Choice of the facility/venue</td>
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<td>Location within the Chapter region</td>
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<td>Duration of the Event</td>
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<td>Registration</td>
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<td>Refreshments</td>
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<td>Cost and pricing</td>
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</table>

6. Based on your experience at this meeting, how likely are you to attend future seminars?

□ Very likely
□ Somewhat likely
□ Not likely

7. How far are you willing to drive to get to a meeting?

□ Less than 30 minutes
□ 30 to 60 minutes
□ 1 to 2 hours

8. Would you like the time of the 2-Day Annual Meeting changed?

□ Yes (specify timeframe)______________________________
□ No

9. Would you like the duration of the meeting changed?

□ Yes (specify number of days or hours): ________________________
□ No, keep the event a two day meeting

10. Are you a member of HDC SETAC?

□ Yes (please note your affiliation: ____________________________)
□ No

11. Would you like for more events to occur throughout the year?

Optional: To be contacted

Thank You for your responses!
12. The HDC-SETAC Board is planning to form several volunteer subcommittees over the next 12 months to enhance and improve communications with our Chapter members and to raise awareness of our Chapters within the region. Volunteer participation does not require any long-term commitments. However, volunteers will be recognized by the Board for their involvement and support. Please let us know if you have any interest in the following potential subcommittees.

- Website - Maintenance, Improvements/Enhancements, etc.
- Newsletter
- Meetings/Events – Professional
- Meetings/Events – Social
- Membership - Marketing and Recruitment
- Corporate Sponsorship - Marketing and Recruitment

13. Any topics/themes you would like to see as part of future Chapter meetings?

______________________________________________________________________________

14. Would you be interested in participating in periodic webinars on relevant topics if the Chapter were to sponsor them?

- Yes
- No

15. Any other suggestions or comments to help us improve future meetings?

______________________________________________________________________________

Thank you very much for coming to the meeting and filling out this evaluation form!! We truly appreciate your support in our efforts and hope to see you again at future events!

HUDDSON-DELWARE REGIONAL CHAPTER
of the SOCIETY OF ENVIRONMENTAL TOXICOLOGY and CHEMISTRY

Optional: To be contacted
Please provide NAME, AFFILIATION, EMAIL ADDRESS
Thank You for your responses!

Name:
Affiliation:
Email Address