Moderator Evaluation and Attendance Sheet

Moderator Name: ________________________________

Session Date: SUN  MON  TUES  WED  Session Time: AM  PM

Session Type: Symposium  10-min  Student 10-min  3-min  Student 3-min

Session Name/Number: ________________________________________________

Room: ____________________

Please take attendance at three points during this session:

1. _________  2. _________  3. _________

Did you have any no-show presenters? Please list the presentation number from the Program Book below:

Equipment Performance: If there was a problem with any aspect of the room, please indicate it here:

Video Projector: _______________________________________________________

Audio/Sound: ________________________________________________________

Lights: ______________________________________________________________

Computer: ___________________________________________________________

Other: _______________________________________________________________

Additional Feedback and Comments:

Please submit this form online using the link you received via email at the conclusion of your session. Thank you!