

PRE-PROGRAM QUESTIONNAIRE

ORGANIZATION: _____

SCHEDULED DATES: _____

By answering all the questions on this questionnaire as completely as possible, you will enable _____ to customize the presentation to the exact needs of your group. Please complete this form, skipping any questions that are not relevant to your particular program, and return it to us prior to the date noted below.

When returning this form, please **include any written material that will help with your organization. This might include such items as: brochures, annual reports, newsletters, magazines, etc.**

We will then schedule a live teleconference between your content decision makers and _____ to discuss the program.

Contact Name: _____

Contact Phone: _____

Please return by: _____

I. THE PROGRAM

A. What is your conference THEME?

B. What is the specific purpose of this meeting?

C. What are your specific objectives for my presentation?

D. Are there any sensitive issues that should be avoided?

E. What is the name and title of my introducer?

F. What takes place before and after my presentation?

Before: _____

After: _____

G. Who are the other speakers on the program with me (if any)?

Speaker: _____ Topic: _____

Speaker: _____ Topic: _____

H. Do you have any special suggestions to help me make this program your best ever?

II. AUDIENCE ANALYSIS

A. Audience

1. Number attending: _____ Are spouses attending? _____

2. Percentage of males: _____ Percentage of females: _____

3. Average age of group: _____ Range in ages _____ to _____

4. Average annual income: \$ _____

Range \$ _____ to \$ _____

5. Educational background: _____

B. What are the major job responsibilities of those in the audience?

III. GENERAL BACKGROUND INFORMATION

A. Industry

1. Current problems:

2. Current challenges:

3. Recent breakthroughs:

B. Organization

1. Current problems:

2. Current challenges:

3. Recent breakthroughs:

C. People / Audience

1. Current problems:

2. Current challenges:

3. Recent breakthroughs:

D. What three main things do you think I should know about your group?

1. _____
2. _____
3. _____

E. What specific activities/behaviors separate your high performance people from your average/below average performers?

1. _____
2. _____
3. _____

F. What areas of overall performance are ripest for improvement?

1. _____
2. _____
3. _____

G. What are the names of the people in your organization who are responsible for:

1. Meeting Planning: _____

2. Management: _____

IV. LOGISTICAL INFORMATION

- A. Meeting facility name: _____
- B. Meeting facility address: _____
- C. Meeting facility phone number: _____
- D. How do I get from the airport to the meeting facility? _____
- E. Name of hotel where I'll be staying: _____
- F. Hotel address: _____
- G. Hotel phone number: _____
- H. Length of talk: _____

THANK YOU VERY MUCH! YOUR HELP IS GREATLY APPRECIATED.