1. How would you rate the overall quality of the Annual Meeting sessions?  
(Please circle your response; 1 = poor, 5 = excellent.) ...........................................  1  2  3  4  5

2. Which session did you enjoy most? ................................................................. Session # _____  
Why? ......................................................................................................................
......................................................................................................................

3. Which session did you enjoy least? ................................................................. Session # _____  
Why? ......................................................................................................................
......................................................................................................................

4. Did you spend any time viewing the poster presentations?  .............................................. Yes □ No □  
If so, did you find this format to be an effective learning experience?  ................................ Yes □ No □

5. In general, how would you rate the overall quality of the meeting as an opportunity to network?  
(Please circle your response; 1 = poor, 5 = excellent.) ...........................................  1  2  3  4  5

6. Did you attend the Exhibit Hall? ................................................................. Yes □ No □  
If yes, approximately how much time did you spend in the Hall? ______ hour(s)

7. How would you rate the quality of the contacts that you made in the Exhibit Hall?  
(Please circle your response; 1 = poor, 5 = excellent.) ...........................................  1  2  3  4  5

8. Were there any companies absent from the Exhibit Hall that you wished to have seen?  
If yes, please list: ........................................................................................................

9. What could be done differently to enhance your SAA Annual Meeting experience?  
........................................................................................................
........................................................................................................
........................................................................................................
........................................................................................................

THANK YOU for your response.  
It will make a difference!

Please return this form to the SAA Registration Desk or to the SAA office at  
17 North State Street, Suite 1425, Chicago, IL  60602; fax 312-606-0728.

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