

# EnRoute Emergency Systems 2010 User Conference Overall Evaluation



Your evaluation is an important part of our planning for our next user conference, and we welcome your comments. Your responses will help us to make our next conference an even more rewarding experience for you. Please fax your response to Jocelyn Rhode at (678) 393-5392 or scan and e-mail to [jocelyn.rhode@infor.com](mailto:jocelyn.rhode@infor.com).

Using the scale shown, check the box that most nearly reflects your opinion.

Name and Title: (Optional) \_\_\_\_\_

Company/Agency Name: (Optional) \_\_\_\_\_

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|----|--|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------|
| 1. | What is your overall rating of the conference?       | Poor                       | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> | Excellent      |
| 2. | How well were your objectives met by the conference? | Not Well                   | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> | Very Well      |
| 3. | How pertinent to you was the material presented?     | Not Pertinent              | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> | Very Pertinent |
| 4. | How well organized was the conference?               | Not Well                   | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> | Very Well      |
| 5. | How would you rate Disney's Yacht Club Resort's      | Poor                       |                            |                            |                            |                            |                            |                            | Excellent      |
|    | Location?  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |                            |                |
|    | Meeting rooms?                                       | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |                            |                |
|    | Hotel rooms?   | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |                            |                |
|    | Meals?   | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |                            |                |
|    | Other amenities/services?                            | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |                            |                |
| 6. | How would you rate the provided evening activities?  |                            |                            |                            |                            |                            |                            |                            |                |
|    | Tuesday - Welcoming Reception                        | Poor                       |                            |                            |                            |                            |                            |                            | Excellent      |
|    | Location?  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |                            |                |
|    | Food?  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |                            |                |
|    | Other amenities/services?                            | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |                            |                |
|    | Thursday - Casino Night Dinner Party                 | Poor                       |                            |                            |                            |                            |                            |                            | Excellent      |
|    | Location?  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |                            |                |
|    | Food?  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |                            |                |
|    | Other amenities/entertainment?                       | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |                            |                |
| 7. | How useful was the Command Center?                   | Not Useful                 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> | Very Useful    |

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|--|----------------|----------------------------|----------------------------|----------------------------|----------------------------|-----------------|----------------------------|----------------------------|
| 8. How beneficial was access to our sponsors?  | Not Beneficial | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | Very Beneficial | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |
| 9. How useful was the educational information you received?  | Not Useful     | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | Very Useful     | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |
| 10. Based on six months, how quickly will you be able to utilize the educational information received?         | Not Quickly    | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | Very Quickly    | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |
| 11. How satisfied were you with the courtesy and professionalism of our associates?                            | Not Satisfied  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | Very Satisfied  | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |
| 12. How satisfied were you with the information you received on our product direction?                         | Not Satisfied  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | Very Satisfied  | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |
| 13. How satisfied were you with the receptivity of ideas expressed for future development?                     | Not Satisfied  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | Very Satisfied  | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |
| 14. How would you rate this conference in value compared to other conferences/training that you have attended? | Not Valuable   | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | Very Valuable   | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |
| 15. What is the likelihood that your agency will attend our next conference?                                   | Not Likely     | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | Very Likely     | 5 <input type="checkbox"/> | 6 <input type="checkbox"/> |
| 16. What could increase the value of our user conference for you?  | _____          |                            |                            |                            |                            |                 |                            |                            |
| 17. Are there any products or services on which you would like more information?                               | _____          |                            |                            |                            |                            |                 |                            |                            |
| 18. Are you aware of any agencies that would be interested in hearing about EnRoute? If yes, their name(s):    | _____          |                            |                            |                            |                            |                 |                            |                            |

Do you have any suggestions for our next user conference or additional comments?

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