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## [Insert Number] Annual Quest Conference Evaluation (PRA Approved ???16)

Thank you for taking the time to evaluate the Quest for Excellence Conference. Your comments will enable us to continue to improve and execute future conferences to meet your needs.

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OMB Control # 0693-0031  
Expiration date: 05/31/2018

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## 1. Please indicate your satisfaction with the following conference sessions.

	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	N/A
Baldrige Award Ceremony	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Monday Leadership Presentations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Monday Q&A Talk Show	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Monday and Tuesday	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Monday Leadership Presentations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Monday Q&A Talk Show	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Monday and Tuesday Concurrent Sessions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tuesday Harry S. Hertz Leadership Award Presentation and Keynote	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wednesday Keynote Session - [Insert Name of Speaker]	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Wednesday Elements of Excellence Presentations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comment (please specify)

2. Please indicate your satisfaction with the following aspects of the conference.

	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied	N/A
Pre-event registration	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Registration/Check-in on-site	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Conference App	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Conference Wi-Fi	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Charging Stations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Conference Headquarters Hotel ([Insert Name of Hotel])	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Charging Stations

Conference Headquarters Hotel ([Insert Name of Hotel])

3. If you attended a Special Session, please indicate which session you attended and your feedback on the session? If you did not attend, please skip to the next question.

- Communities of Excellence 2026
- Exploring Cybersecurity Excellence

Comments:

4. Please indicate whether or not your expectations were met at the conference relative to the following.

	Fully Met Expectations	Met Most Expectations	Neutral	Met Few Expectations	Did not Meet Expectations	N/A
Learn from Awardees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Opportunity to Interact with Awardees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Opportunity to interact with Exhibitors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Opportunity to interact with Attendees	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Improve your knowledge of the Baldrige Criteria	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. How likely, or unlikely, is it that you would recommend next year's [insert name of] Conference to a professional colleague, key customer, partner, or supplier?

- 10 Extremely Likely  8  6  4  2

5. How likely, or unlikely, is it that you would recommend next year's [insert name of] Conference to a professional colleague, key customer, partner, or supplier?

- |   |                         |   |
|---|-------------------------|---|
| <input type="radio"/> 10 Extremely Likely | <input type="radio"/> 8 | <input type="radio"/> 2                 |
| <input type="radio"/> 9                   | <input type="radio"/> 6 | <input type="radio"/> 1                 |
| <input type="radio"/> 8                   | <input type="radio"/> 4 | <input type="radio"/> Not At All Likely |
| <input type="radio"/> 7                   | <input type="radio"/> 3 |   |

Comment (please specify)

6. Please rate how valuable the information from the conference will be in your improvement efforts.

- |                                     |                                     |
|-------------------------------------|-------------------------------------|
| <input type="radio"/> Very Valuable | <input type="radio"/> Limited Value |
| <input type="radio"/> Valuable      | <input type="radio"/> Not Valuable  |
| <input type="radio"/> Neutral       | <input type="radio"/> No Opinion    |

7. Please rate how well this conference overall met your expectations.

- |                                |                                  |
|--------------------------------|----------------------------------|
| <input type="radio"/> Exceeded | <input type="radio"/> Met some   |
| <input type="radio"/> Met all  | <input type="radio"/> Met none   |
| <input type="radio"/> Met most | <input type="radio"/> No opinion |

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8. What was one of the key strengths of the conference this year?

9. What is the one factor keeping you from giving this a higher rating?

10. Please check the sector to which your organization belongs.

- Education                       Manufacturing                       Small Business
- Government                       Nonprofit
- Health Care                       Service

11. How is your organization using the Baldrige Criteria?

- Not currently using the Criteria
- For raising awareness of performance excellence
- For self assessment and improvement
- To apply for feedback or the Award

10. Please check the sector to which your organization belongs.

- Education
- Manufacturing
- Small Business
- Government
- Nonprofit
- Health Care
- Service

11. How is your organization using the Baldrige Criteria?

- Not currently using the Criteria
- For raising awareness of performance excellence
- For self assessment and improvement
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12. How many [insert name of] conferences have you attended?

- 1
- 2-3
- 4-5
- 6+

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