

HOTEL EVALUATION

CITY _____ DATE _____

HOTEL NAME _____

HOTEL ADDRESS _____

SPEAKER _____

Rate on a scale from 0 to 10

10 = I Want to move in **0** = Keep me away from this dump

- _____ Room lighting
- _____ Microphone
- _____ Meeting Room Temperature
- _____ Cooperative set-up people
- _____ Chairs, tables, room equipment
- _____ Sleeping room
- _____ Check-in front desk
- _____ Accuracy of bill
- _____ Coffee, food for function
- _____ Coffee/food display table
- _____ Service
- _____ Location

_____ Your over-all evaluation of hotel **(0-10)**

_____ Would you want to go back there? YES OR NO

Additional Comments: