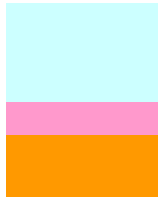


**IUPAB Questionnaire Summary Form**

Name of Organizer

Title of Event:

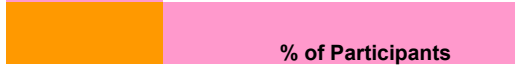
Number of Student Participants:  
 Number of Senior Investigators  
 Number of Tutors  
 Number of Lecturers/Speakers  
**Total Number Participants**



**Number of Applicants:**

**Number of Accepted Participants:**

**Total Number Questionnaires Returned**



Questionnaires submitted to students ( X voted out of X )

**Question 1: Organisation of the program.**

Number of Answers

Excellent	Good	Adequate	Poor	Unsatisfactory	Sum	% of Total
					0	#DIV/0!

**Question 2: Quality of the practical program.**

Number of Answers

					0	#DIV/0!
--	--	--	--	--	---	---------

**Question 3: Quality of Formal Presentations.**

Number of Answers

					0	#DIV/0!
--	--	--	--	--	---	---------

**Question 4: Was there adequate discussion after each presentation/session, during practical work?**

Number of Answers

					0	#DIV/0!
--	--	--	--	--	---	---------

**Question 5: Balance between practical work and lectures? (Only for courses with hands-on practical work)**

Number of Answers

					0	#DIV/0!
--	--	--	--	--	---	---------

**Question 6: Did the Course fulfill your expectations?**

Number of Answers

					0	#DIV/0!
--	--	--	--	--	---	---------

**Question 7: Was there...**

... sufficient information available about the Course?

... any problem with transportation?

... any problem with the Course language?

... enough time for informal discussions with all participants?

... enough time for discussion after poster sessions?

... opportunity for informal discussion with lecturers?

... possibility to meet others in your field?

... chance to obtain overview of the fields?

... chance to receive help with current work?

#Yes	% of Total	#No	% of Total
	#DIV/0!		#DIV/0!
	#DIV/0!		#DIV/0!
	#DIV/0!		#DIV/0!
	#DIV/0!		#DIV/0!
	#DIV/0!		#DIV/0!
	#DIV/0!		#DIV/0!
	#DIV/0!		#DIV/0!
	#DIV/0!		#DIV/0!
	#DIV/0!		#DIV/0!

**Question 9: Duration of the Course?**

Number of Answers

Right	Too Long	Too Short	Should Be	days	Sum	% of Total
					0	#DIV/0!

**Question 10: Location and Accommodation of the Course?**

Number of Answers

Excellent	Good	Adequate	Poor	Unsatisfactory	Sum	% of Total
					0	#DIV/0!

**Question 11: Quality of Facilities?**

Number of Answers

					0	#DIV/0!
--	--	--	--	--	---	---------

Question 12: Give your overall evaluation of the Course	Excellent	Good	Adequate	Poor	Unsatisfactory	Sum	% of Total
Number of Grades						0	#DIV/0!
Evaluation Grades in % of Total Participants	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

Total Answers to Questions by their Numbers

	Excellent	Good	Adequate	Poor	No Comment	Sum
Quest 1						0
Quest 2						0
Quest 3						0
Quest 4						0
Quest 5						0
Quest 6						0
Quest 7	Yes			No		
Quest 8	not applicable					
Quest 9	not applicable					
Quest 10						0
Quest 11						0
Quest 12						0
Total	0	0	0		0	

Question 14: How did you learn about the FEBS Event?

Source	Posters	Web/E-mail	Advert.	Mouth	Other
Number of Answers					

Additional Comments in Questionnaires should be summarized and appended on additional pages in the Scientific Report categorized in *negative / positive / general comments*