

DIAC Event Evaluation Form. Name and date of event: _____

1. This event addressed worthwhile or important issues.

Strongly Agree ___ Somewhat agree ___ No Opinion ___ Somewhat disagree ___ Strongly Disagree ___

2. This event provided me with knowledge, skills, or ideas that I can use to help create more inclusive experiences on campus.

Strongly Agree ___ Somewhat agree ___ No Opinion ___ Somewhat disagree ___ Strongly Disagree ___

3. I felt safe to participate and to contribute my ideas at this event.

Strongly Agree ___ Somewhat agree ___ No Opinion ___ Somewhat disagree ___ Strongly Disagree ___

4. What did you like best about this event?

5. What could be improved about this event?

6. Which describes you best?

___ Student

___ Faculty ___ Non-teaching faculty

___ Staff ___ Classified Staff ___ PACES employee

___ Community Member ___ Other: _____

7. I would be interested in attending the following types of DIAC events in the future:

Event Format:

- ___ hands-on, interactive workshops
- ___ guest speakers
- ___ film screenings
- ___ town halls
- ___ performances
- ___ informal discussions
- ___ structured discussions (faculty, staff, students)
- ___ online self-paced learning modules
- ___ individual consultation with DIAC members
- ___ problem-based sessions
- ___ other: _____

(some options adapted from by CCI survey)

Topics:

- ___ race
- ___ ethnicity/culture
- ___ national origin
- ___ language difference/multilingualism
- ___ gender (including identity/expression)
- ___ sexuality (including identity)
- ___ body image/bodies
- ___ physical or cognitive ability
- ___ socio-economic status
- ___ religious beliefs
- ___ military status
- ___ age
- ___ political beliefs
- ___ other: _____