



Arts Development Programs are supported by the Government of South Australia through Arts SA.

# SHOWS ON THE ROAD PROGRAM

## FORM D: Evaluation Questionnaire

Attach completed FORM C: Statement of Income and Expenditure to this document

**Name of Presenter Group:** \_\_\_\_\_

**Name of Performance:** \_\_\_\_\_

**Venue:** \_\_\_\_\_

**Attendance Numbers:** \_\_\_\_\_ **Date Event Held:** \_\_\_\_\_

### Publicity

How much lead-time did you allow for the event in general? \_\_\_\_\_

How/Where did you publicise the event? \_\_\_\_\_

\_\_\_\_\_

How much lead-time did you allow for publicity? \_\_\_\_\_

### Performance

Was the event part of a tour involving other participating groups in the Shows on the Road Program within your region? \_\_\_\_\_

Were other groups or organisations in your community involved in the presentation of the performance and how? \_\_\_\_\_

\_\_\_\_\_

Was the venue appropriate? \_\_\_\_\_

Was the performance considered successful? If Yes, how? If Not, what were its shortcomings? \_\_\_\_\_

\_\_\_\_\_

How did local people benefit from the performance? \_\_\_\_\_

Were workshops conducted in conjunction with the performance? Please describe: \_\_\_\_\_

\_\_\_\_\_

**DATE:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**Please complete and return to:**

**Executive Producer,  
Country Arts SA  
2 McLaren Parade, Port Adelaide SA 5015**

**FOR COUNTRY ARTS SA USE ONLY:**

**Project name:** \_\_\_\_\_

Date received: \_\_\_\_\_

Date processed: \_\_\_\_\_

Application No: \_\_\_\_\_