



Pre-Program Questionnaire

Please fill out this questionnaire which helps me prepare a customized program or keynote that is targeted to the needs of your group.

LOGISTICS:

Company/Organization:

Closest airport from Hotel/Event Venue:

Event Venue Address:

Main Contact: Cell Phone:

Email:

Secondary Contact: Cell Phone:

Email:

Audio/Visual Contact: Cell Phone:

Email:

CULTURE:

a. Organization's Mission:

b. Strongly Held Organizational Beliefs? Mottos? Icons?

c. Significant Historical Events or recent Achievements in your industry /organization / group during the past year? (e.g., expansion, relocation, reduction in force, new laws, etc.)

CONFERENCE/EVENT DETAILS:

Special Request: Please send me as much information as possible to help increase my understanding of your organization. This includes website / event links, newsletters, brochures or other information you feel would be of value.

a. Who did you have speak last year?

b. What did you and the audience like about him/her?

c. What do you want the audience to do, think or feel when I'm done?



d. Are there any topics I shouldn't approach?

f. What is the ONE thing you want to be top of mind of your people after my presentation?

Getting to Know Your Audience:

a. What are the top three challenges faced by the people who will be in my audience?

b. Approximate Number of attendees?

% Male? % Female? Spouses invited? Yes/No

c. Average age of group? Range of age from to

d. Major job title(s) of audience members?

e. What are the names/titles of the Key Leaders who will be at the meeting?

f. Specialty terms, jargon, industry speak etc.

g. What are some of the current problems experienced by your industry / organization?

h. What do you consider the three greatest strengths of people attending?

i. What do you consider the three greatest weaknesses of people attending?

j. What areas of their work performance are in need of improvement?

THE PROGRAM ITSELF: (in addition to what we've discussed on calls)

a. Name and title of my introducer:

b. My program: Day:

c. Starting times for: My program _____ Entire program _____

d. Ending times for: My program _____ Entire program _____

e. How will you measure the success of my presentation(s)?

f. What is the purpose of this meeting (annual meeting, awards, etc.)?

g. What takes place before my program (speaker, meal, workshop)?

h. What takes place immediately after my program (break / another speaker / nothing, etc.)?

i. If other speakers are on the program with me, who are they and what are their topics?

4. ADDITIONAL COMMENTS:

