

Name: \_\_\_\_\_ Business: \_\_\_\_\_

## Advisory Committee Survey

Please read each item below and select the response that best describes your opinion using the space provided for comments.

**1. My professional skills and knowledge are being put to good use on this committee.**

Strongly Agree     Agree     Disagree     Strongly Disagree

**2. The structure of the Advisory Committee meetings provides me with the information I need to fully participate. (If not, please describe below)**

Strongly Agree     Agree     Disagree     Strongly Disagree

**3. The equipment and training materials I have observed in this program are of the quality used in industry.**

Strongly Agree     Agree     Disagree     Strongly Disagree

**4. The instructional resources provided to the students and instructors appear to be sufficient.**

Strongly Agree     Agree     Disagree     Strongly Disagree

**5. I have been satisfied with the quality of interns from this program.**

Strongly Agree     Agree     Disagree     Strongly Disagree     Not Applicable

**6. I have been satisfied with the quality of graduates from this program.**

Strongly Agree     Agree     Disagree     Strongly Disagree     Not Applicable

**7. I would like to contribute to this program as a guest speaker or with equipment donations, scholarships, or other types of support. (Please describe below.)**

**8. My overall rating of the effectiveness of the Advisory Committee meeting is:**

Excellent     Very Good     Satisfactory     Needs Improvement     Unsatisfactory

**9. Additional Comments:** (You may use the back of this survey for additional space.)