

Presenter Development: Performance Evaluations FY2023

FORM A

INSTRUCTIONS

Please only edit WHITE cells. Totals are automatically calculated. When finished, select "Save As" and rename your document. You may submit this form as an excel file or PDF.

Organization	
City/Town	
Company/Artist	
Number of Artists in Group	
Date(s) of Events	
Specific communities served	

Complete one (1)
FORM A for each
engagement supported
by the Presenter
Development program

ACTIVITY	NO. OF EVENTS	ADMISSION PRICE RANGE	ATTENDANCE
Public performance			
Residency activity			
- school performance			
- workshop			
- master class			
- lecture-demonstration			
- other:			
- other:			
TOTALS	0		0

Please characterize the audience for your public performance by percentage.

AGE (required)	%	OTHER DEMOGRAPHICS (if data is available).	%
Children		Handicap	
Adults		Ethnic minority	
Senior Citizens		Other:	
Total (= 100)	0%	Other:	
		Other:	

*No total necessary for
DEMOGRAPHIC
percentages.
Demographic
categories may overlap
with each other.*

Did you target any specific group with this performance?

If yes, please describe the target group:

Was this a block-booked event?

If yes, name the organizations/towns in the block:

Select your responses on the quality of this engagement (1 = low, 5 = high, or N/A)

Promotional material quality	<input type="text"/>
Timeliness of promotional materials	<input type="text"/>
Communication with management (if applicable)	<input type="text"/>
Contract/rider compatible with your organization/community	<input type="text"/>
Artist professionalism	<input type="text"/>
Technical crew professionalism (if applicable)	<input type="text"/>
Technical set-up compatible with venue	<input type="text"/>
Performance started/ended on time	<input type="text"/>
Quality of performance	<input type="text"/>
Audience reception	<input type="text"/>
Attendance for this event	<input type="text"/>
Appropriateness of performance venue for this artist	<input type="text"/>
Quality of outreach activities	<input type="text"/>

Please summarize your overall response to this engagement. Specify any compelling positive or negative factors not covered elsewhere and explain any circumstance you believe to be of particular interest.

Optional: Please provide testimonials from audience members, students, teachers, presenter staff, or other individual impact by this engagement. TESTIMONIALS ARE EXTREMELY HELPFUL IN GRANT REQUESTS AND REPORTING.

Testimonial 1 (include Name and indicate audience/student/teacher/etc.)

Testimonial 2 (include Name and indicate audience/student/teacher/etc.)

Testimonial 3 (include Name and indicate audience/student/teacher/etc.)

Additional testimonials are always welcome. Additional testimonials may be submitted in a separate document (Word, PDF, etc.)

Signature (type for electronic submissions)	
Print Name	
Title	
E-mail address	

Date	
Phone	