|  |  |  |
| --- | --- | --- |
|  | **OPEN SPACE AND COMMUNITY FACILITIES**  **EVENT DEBRIEF AND EVALUATION FORM** | OFFICE USE ONLY |
| Place stamp here (Office use) | Date \_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PART 1 - PURPOSE** | | | | | | | | | |
| The Event Debrief & Evaluation Report aims to provide feedback to Council from applicants that have recently held an event at a Council owned recreation or community facility.  This Debrief & Evaluation Report is due within thirty (30) days of the special event.  The purpose of the Debrief & Evaluation Report is to establish how successful the special event was and if further measures need to be put in place for future events. It will also clarify that the event was in line with the approval letter sent from Council.    It is recommended that you refer to your copy of the approval letter sent from Council to assist you in completing this report. | | | | | | | | | |
| **PART 2 – EVENT DETAILS** | | | | | | | | | |
| **DESCRIPTION OF EVENT** | | | | | | | | | |
| Facility name | | | | | | | | | |
| Type of event | | | | | | | | | |
| Date & Time of event | | | | | | | | | |
| Number of attendees | | | | | | | | | |
| **APPLICANT DETAILS** | | | | | | | | | |
| Name | | | | Company/Group | | | | | |
| Postal Address | | | | PO Box | | | Telephone | | |
| Suburb | | State | | Postcode | | | Mobile | | |
| Email |  | | | | | | | | |
| **PART 3 – EVENT EVALUATION** | | | | | | | | | |
| Briefly describe your event | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
| Overall how would you rate the success of your event? | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
| Were there any unexpected issues (positive or negative) that came up during the event? | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
| What could you do to improve future event/s? | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
|  | | | | | | | | | |
| How would you rate the following aspects of your event? *Please indicate by ‘X’* | | | | | | | | | |
|  | | | Poor | Fair | Good | Very Good | | Excellent | N/A |
| Attendance | | |  |  |  |  | |  |  |
| Location | | |  |  |  |  | |  |  |
| Facilities | | |  |  |  |  | |  |  |
| Parking | | |  |  |  |  | |  |  |
| External vendors i.e. amusement rides, market stalls, food stalls etc. | | |  |  |  |  | |  |  |
| Cost i.e., Did the event run within budget? | | |  |  |  |  | |  |  |
|  | | |  |  |  |  | |  |  |
| **PART 4 – FEEDBACK** | | | | | | | | | |

|  |
| --- |
| **FEEDBACK** |
| Please provide any relevant feedback or comments |
|  |
|  |
|  |
|  |
| What feedback have you received from attendees / community members / vendors / event partners etc.? |
|  |
|  |
|  |
|  |
| Please attach any relevant photos, media releases or provide any additional information that you feel is relevant to this report |
|  |
|  |
|  |
|  |

|  |
| --- |
| **PART 5 – DECLARATION** |

|  |  |  |
| --- | --- | --- |
| **APPLICANT DECLARATION** | | |
| *Any person signing this report certifies to Cessnock City Council that they have the authority to act on behalf of the organisation.*  *I/We declare that all the information in the report and relevant attachments is, to the best of my/our knowledge, true and correct.*  *I/We give consent to Cessnock City Council to use the report and attachments, provided in support of this report for advertising and notification purposes.*  *I/We understand that additional information on the project may need to be provided to Council if required.* | | |
| Representative(s) Name | | Date |
| Representative(s) Signature | | |
| Representative(s) Position in organisation | | |
|  | | |
| Representative(s) Name | | Date |
| Representative(s) Signature | | |
| Representative(s) Position in organisation | | |
| **PRIVACY DISCLOSURE** | | |
| Council is subject to the *Privacy and Personal Information Protection Act 1998* (NSW) in dealing with your personal information. [Council's Privacy Management Plan](https://www.cessnock.nsw.gov.au/Council/Governance-transparency/Privacy-personal-information?BestBetMatch=privacy|b74f3ed8-04cf-4e5b-b70e-29f098fb7021|eba92a11-ce0d-435e-904b-4bc697ddd2f2|en-AU) and [Privacy Statement](https://www.cessnock.nsw.gov.au/Site-Footer/Sub-Footer-Links/Privacy-Statement) describe how the agency meets these obligations. | | | |
| Purpose | The information on this event debrief and evaluation form is being collected for the purpose of processing the application form. | | |
| Intended Recipients | Cessnock City Council | | |
| Supply | Voluntary | | |
| Consequence of  Non-provision | If you do not supply the information, we will not be able to process your application. | | |
| Storage and Security | Your personal information will be kept in Council's Information Management System in  accordance with the relevant legislation. Council's address is 62-78 Vincent Street CESSNOCK  NSW 2325 | | |
| Access | You may access, correct or update your personal information by visiting [Council's website,](https://www.cessnock.nsw.gov.au/Council/Governance-transparency/Privacy-personal-information?BestBetMatch=privacy|b74f3ed8-04cf-4e5b-b70e-29f098fb7021|eba92a11-ce0d-435e-904b-4bc697ddd2f2|en-AU) contacting Council's Privacy Contact Officer on 4943 4100 or by sending an email to [council@cessnock.nsw.gov.au](mailto:council@cessnock.nsw.gov.au) | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **HOW TO LODGE YOUR APPLICATION** | | | | |
| **Address the application to**  General Manager  Cessnock City Council  PO Box 152  CESSNOCK NSW 2325 |  | **In person at Council’s Administration Building**  Cessnock City Council  62-78 Vincent Street  CESSNOCK NSW |  | **How to Contact Us**  Phone: (02) 4993 4100  Fax: (02) 4993 2500  Email: [council@cessnock.nsw.gov.au](mailto:council@cessnock.nsw.gov.au)  [www.cessnock.nsw.gov.au](http://www.cessnock.nsw.gov.au)  **Office Hours**  9am to 5pm Monday to Friday  *\*Payments are accepted until 4.30pm* |