



## EVENT IMPACT FORM

Your name: \_\_\_\_\_

Your email: \_\_\_\_\_

Your organization: \_\_\_\_\_

How many people were in attendance? \_\_\_\_\_

Which departments/organizations hosted the event? \_\_\_\_\_

\_\_\_\_\_

Who were the event's Community Partners? \_\_\_\_\_

\_\_\_\_\_

List of Panel Participants:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What type of questions were asked during the open Q&A?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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Did you host a BraveSpeak session after the event? If so, how many people stayed to take part?

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\_\_\_\_\_  
\_\_\_\_\_

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Was the event covered by the local media? Please provide links to articles.

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Were there measurable results from the screening event? Fundraising? Volunteers? How many survivors shared their story after the film?

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Did you raise funds at the event for your cause or organization? If so, how much?

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*Brave Miss World* has given survivors the encouragement they need to seek help. In the days/weeks following the screening, did you note a surge in need of services that your organization and/or Community Partners provide?

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Any general comments or suggestions?

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