ORAL PRESENTATION EVALUATION FORM

PLEASE NOTE: THIS FORM WILL BE GIVEN TO THE PRESENTER AFTER THE EVENT TO PROVIDE FEEDBACK

| Name of Presenter: | Department / School: | | | | |
|--|-------------------------|-------------|-------------|-----------|-----------|
| Platform Session: | | | | | |
| Please mark the score for each evaluation criterion bottom for the overall score. | pelow. When you are fin | ished, comb | ine the tot | al points | s at the |
| | Poo | r Fair | Average | Good | Excellent |
| Content Clarity of content Quality of content (background, methodology, fine Originality and complexity of project Significance of project (to field of study, commun Support main points Comments on Content: | | C | ontent Poi | ints = | / 25 |
| Organization Appropriate use of media Smooth transitions between topics Logical flow of sections/ideas Clear thesis and supporting data Informative and clear project summary Comments on Organization: | | Organ | ization Po | ints = | /25 |
| Delivery Professional and confident Engaged with audience Clear voice with good pace Command of language/avoiding jargon Response to questions Comments on Delivery: | | De | elivery Po | ints = | / 25 |
| Overall Impression/Quality | | Overall Imp | oression P | oints = _ | /5 |
| Comments (may use back of paper as well) What were the strengths of this presentation? | | TOTA | L SCOR | E = | / 80 |
| Do you have any suggestions for improvement? | | | | | |