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 below. When you are finished, combine the total points at the bottom for the overall score.

	Poor	Fair	Average	Good	Excellent
Content					
Clarity of content	1	2	3	4	5
Quality of content (background, methodology, findings, etc.)	1	2	3	4	5
Originality and complexity of project	1	2	3	4	5
Significance of project (to field of study, community, etc.)	1	2	3	4	5
Support main points	1	2	3	4	5

Comments on Content:

Content Points = _____ / 25

	Poor	Fair	Average	Good	Excellent
Organization					
Appropriate use of media	1	2	3	4	5
Smooth transitions between topics	1	2	3	4	5
Logical flow of sections/ideas	1	2	3	4	5
Clear thesis and supporting data	1	2	3	4	5
Informative and clear project summary	1	2	3	4	5

Comments on Organization:

Organization Points = _____ / 25

	Poor	Fair	Average	Good	Excellent
Delivery					
Professional and confident	1	2	3	4	5
Engaged with audience	1	2	3	4	5
Clear voice with good pace	1	2	3	4	5
Command of language/avoiding jargon	1	2	3	4	5
Response to questions	1	2	3	4	5

Comments on Delivery:

Delivery Points = _____ / 25

	Poor	Fair	Average	Good	Excellent
Overall Impression/Quality	1	2	3	4	5

Overall Impression Points = _____ / 5

Comments *(may use back of paper as well)*

TOTAL SCORE = _____/ 80

What were the strengths of this presentation?

Do you have any suggestions for improvement?