Presentation Assessment Form

Presenter's Name

| Title of Presentation | | | | | |
|---|------------|---|------------|---|--|
| Assess the following aspects of the Presentation | | | | | |
| | Poor | | Excellent | | |
| Quality of Illustrations and Text | 1 | 2 | 3 | 4 | |
| Organization of the Presentation (were topics covered in a logical order) | 1 | 2 | 3 | 4 | |
| | Not at all | | Definitely | | |
| Was the presentation understandable? | 1 | 2 | 3 | 4 | |
| Did the conclusions reflect the material presented? | 1 | 2 | 3 | 4 | |
| | Poor | | Excellent | | |
| Overall assessment of the presentation | 1 | 2 | 3 | 4 | |

Write any comments or suggestions below. These will be retyped and provided anonymously to the presenter.