

PRESENTATION ASSESSMENT FORM

Rating scale 1 = not at all; 10 = exceptional

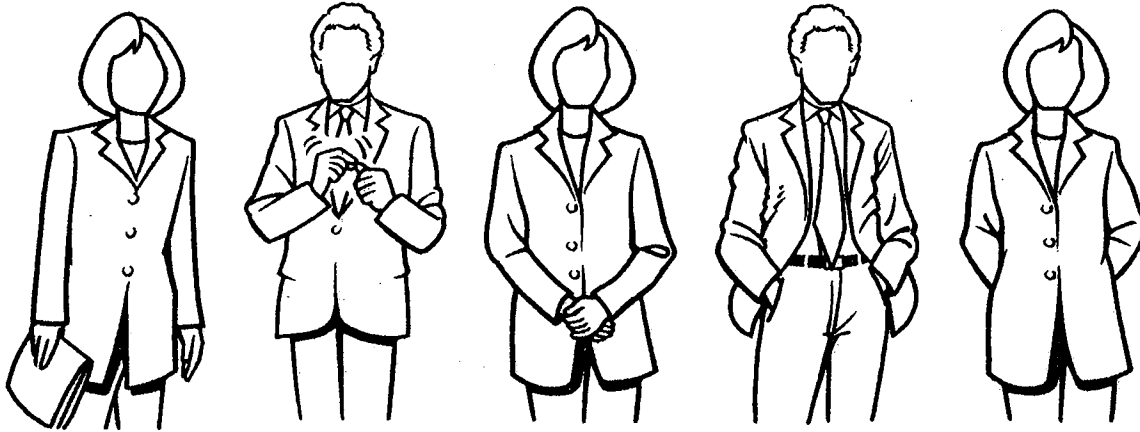
Presentation:

Was I **organized**? (1-10) _____

Strengths and deficiencies of my content? _____

Was my delivery **passionate**? (1-10) _____

Primary posture: (circle one or more):



Gestures and movement: Defined, nebulous or limited

Eye contact: Sustained for three to four seconds? Y N

Shared—Did I involve everyone? Y N

Facial expressions: Inviting or reserved

Voice: Dynamic or monotone

Verbal graffiti/filler used: _____

Was I **engaging**? (1-10) _____

Engagement techniques used: _____

Was I **natural** and conversational? (1-10) _____

Overall rating (1-10) _____

Additional comments and observations: _____
