|  |  |  |  |
| --- | --- | --- | --- |
| **Presentation Title:** |  | | |
| **Presenter's Name:** |  |  | Date: [DD/MM/YYYY] |

**Content and Structure**

**1. Clarity of Objectives:** Were the objectives of the presentation clearly stated?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ☐ Excellent | ☐ Good | ☐ Average | ☐ Poor | ☐ Not Applicable |
| Comments: |  | | | |
|  | | | |

**2. Organization:** Was the presentation well-organized and logically structured?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ☐ Excellent | ☐ Good | ☐ Average | ☐ Poor | ☐ Not Applicable |
| Comments: |  | | | |
|  | | | |

**3. Depth of Content:** Was the content thorough and comprehensive?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ☐ Excellent | ☐ Good | ☐ Average | ☐ Poor | ☐ Not Applicable |
| Comments: |  | | | |
|  | | | |

**Delivery and Style**

**4. Engagement:** Did the presenter engage the audience effectively?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ☐ Excellent | ☐ Good | ☐ Average | ☐ Poor | ☐ Not Applicable |
| Comments: |  | | | |
|  | | | |

**5. Communication Skills:** How effective were the presenter's communication skills (clarity, pace, volume)?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ☐ Excellent | ☐ Good | ☐ Average | ☐ Poor | ☐ Not Applicable |
| Comments: |  | | | |
|  | | | |

**6. Use of Visual Aids:** Were the visual aids (slides, charts, videos) helpful and well-integrated?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ☐ Excellent | ☐ Good | ☐ Average | ☐ Poor | ☐ Not Applicable |
| Comments: |  | | | |
|  | | | |

**Section 3: Interaction**

**7. Audience Interaction:** Did the presenter encourage questions and interaction from the audience?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ☐ Excellent | ☐ Good | ☐ Average | ☐ Poor | ☐ Not Applicable |
| Comments: |  | | | |
|  | | | |

**8. Handling Questions:** How well did the presenter handle questions and provide answers?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ☐ Excellent | ☐ Good | ☐ Average | ☐ Poor | ☐ Not Applicable |
| Comments: |  | | | |
|  | | | |

**Section 4: Overall Impressions**

**9. Overall Effectiveness:** How would you rate the overall effectiveness of the presentation?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ☐ Excellent | ☐ Good | ☐ Average | ☐ Poor | ☐ Not Applicable |
| Comments: |  | | | |
|  | | | |

**10. Recommendations for Improvement:**

Please provide any suggestions for improvement.

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**Additional Comments**

Any additional feedback or comments?

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