CMPS 4991 / PRESENTATION CRITIQUE FORM

Presenter: ________________________________     TIME: __________________
Title: _____________________________________
Reviewer: ________________________________

Please circle the overall rating for each numbered category.

1. Interesting? Why? [ 3(excellent)  2(average)  1(poor) ]

2. Slides: look and content: [ 3(excellent)  2(average)  1(poor) ]

3. Presenter’s Overall Style: [ 3(excellent)  2(average)  1(poor) ]
   a. Faces audience
   b. Eye contact
   c. Reads notes
   d. Voice
   e. Movement

4. Presenter’s tone (friendly, harsh, nervous): [ 3(excellent)  2(average)  1(poor) ]

5. Annoying habits?

6. Best part of presentation:

7. Worst part of presentation: