Oral Presentation Feedback

UURAF

PRESENTER NAME[S]: _____

Category: _____ **Section:** ___ **Time:** _____

Use the scale below to evaluate the content of the oral presentation.

0 = Poor/Not Addressed; 1 = Developing; 2 = Competent; 3 = Exemplary

Criteria	Poor/ NA	Dev	Comp	Exemp.
Statement of research problem/rationale				
1. Clearly states the hypothesis or question(s) addressed.	0	1	2	3
2. Effectively explains the justification/significance of the project.	0	1	2	3
Literature Review				
3. Adequately cites existing research or scholarship regarding the topic.	0	1	2	3
4. Explains why this study is needed (e.g., to fill gaps or add to existing knowledge).	0	1	2	3
Methods/Theoretical Framework:				
5. Clearly describes the methods used and/or theoretical approaches.	0	1	2	3
Analysis/Results:				
6. Clearly and accurately presents findings or arguments.	0	1	2	3
Discussion/Conclusion:				
7. Explains the importance of the findings.	0	1	2	3

Use the scale below to answer the questions regarding organization and presentation skills.

SA = Strongly Agree   A = Agree   N = Neither   D = Disagree SD = Strongly Disagree

General Organization	SA	A	N	D	SD
Logical sequence of ideas and supporting information.					
Visual aids have professional appearance.					
Effectively used time.					

Presentation Skills	SA	A	N	D	SD
Made good eye contact.					
Used appropriate volume when speaking.					
Enunciated clearly.					
Had smooth transitions between sections.					
Competently answered questions.					

Strengths (optional):

_____

_____

Weaknesses (optional):

_____

_____

RETURN FORM TO REGISTRATION TABLE BEFORE LEAVING THE FORUM. THANK YOU.