

AAIC Oral Presentation Evaluation Form

Division: _____

Evaluator Name: _____

AAIC Presenter: _____

Title: _____

Your comments in each of the following areas will be greatly appreciated by the Awards Chair.

Note: Please rate the presenter as follows in each area: 5 = EXCELLENT; 4 = GOOD JOB; 3 = AVERAGE; 2 = NEEDS SOME WORK; 1 = NEEDS A LOT OF IMPROVEMENT.

Scientific Content **Rating** _____
(too much jargon?, creative?, clear take-home message?, appropriate for audience?, coverage of topic?, etc)

Organization **Rating** _____
(followed logical sequence?, obvious outline?, wandering or unfocused?, clear conclusion?, etc)

Verbal Skills **Rating** _____
(monotonous?, too quiet or too loud?, umms, ahhs, oks, likes?, mumbling or well-enunciated?, etc)

Non-verbal Skills **Rating** _____
(eye-contact w/audience?, appearance?, fidgeting or stiff?, nervous or relaxed?, interface with visuals?, etc)

PowerPoint Display / Visual Aids **Rating** _____
(background—visually pleasing, distracting?, appropriate visuals?, fonts—clear/hard to read, too large/small?)

Knowledge of Material **Rating** _____
(understood topic?, able to answer questions?, etc)

Overall Conclusions/Impression: **Total** _____