

Presentation Feedback Sheet

Subject _____ **Date** _____

“An evaluation of the presentation, not the person.”

Things that I liked about the presentation. (Please circle what you liked most)

Things that I disliked about the presentation (Please circle what you disliked most)

Suggestions for a better presentation (Circle the suggestion that might best improve it)

Rate the following: (1=inadequate 2=borderline 3=satisfactory 4=good 5=excellent)

1 2 3 4 5 Preparation (materials and talk)

1 2 3 4 5 Value of content to me

1 2 3 4 5 Overall delivery

1 2 3 4 5 Amount of interaction (exercises, discussion, one-on-one coaching, etc.)

1 2 3 4 5 Quality of interaction (rate the presenter, not the group)

1 2 3 4 5 I would/ would not recommend (5= recommend strongly)

The presentation was within time: ___ yes ___ no