



Speaker Evaluation Form

Presentation / Workshop Name: _____

Name of Presenter: _____

Date of Presentation: ____/____/____

Section I. Event Ratings							
To help improve the quality of future presentations, please complete this evaluation form.							
Key: 5 = Excellent, 4 = Very Good, 3 = Good, 2 = Fair, 1 = Poor. N/A = Not Applicable (No Opinion). Please circle your choice.							
1.	Overall evaluation of this presentation:	5	4	3	2	1	N/A
2.	Did this presentation meet your expectations? If it didn't, please let us know:	5	4	3	2	1	N/A
3.	Level of usefulness of this presentation to you?	5	4	3	2	1	N/A
4.	Would you recommend this presentation to others?	5	4	3	2	1	N/A
5.	Speaker's knowledge about the topic for this presentation:	5	4	3	2	1	N/A
6.	Speaker's presentation skills:	5	4	3	2	1	N/A
7.	Speaker explained things clearly in this presentation:	5	4	3	2	1	N/A
8.	Quality of the slides / PowerPoint for this presentation:	5	4	3	2	1	N/A
9.	Quality of the live demo(s) for this presentation:	5	4	3	2	1	N/A
10.	Quality of the handouts for this presentation:	5	4	3	2	1	N/A

Section II. Additional Information	
1.	Topics presented that you found most useful:
2.	Topics you think should have been added in this presentation:
3.	Topics you think should have been eliminated in this presentation:
4.	Other suggestions that could have improved this presentation: