

Mountain States Conference Platform Presentation Evaluation Form

Presenter's Name: _____ Abstract #: _____

Presenter's Institution: _____

Evaluator: ☐ Resident ☐ Fellow ☐ Preceptor ☐ RPD ☐ Other: _____

Presentation Feedback	1=Needs Improvement 5=Excellent	Comments
Presenter demonstrated strong presentation skills: pace and volume were appropriate. Good eye contact. Free of distracting mannerisms.	1 2 3 4 5	
Slides were clear and readable and augmented the presentation well.	1 2 3 4 5	
The presentation was organized and flowed well.	1 2 3 4 5	
Project was clearly described: sufficient background to understand the project; methods clearly described; results presented for each objective; conclusions are clear.	1 2 3 4 5	
Presenter handled questions well.	1 2 3 4 5	
Handout is well organized and contains useful information.	1 2 3 4 5	
Presentation strengths:		
One key way to improve presentation:		
Project / Research Feedback	1=Needs Improvement 5=Excellent	Comments
Reasons for selecting project clear; objectives clearly stated.	1 2 3 4 5	
Methods appropriate to answer research question; statistics appropriate for the study design.	1 2 3 4 5	
Results relevant to pharmacy practice.	1 2 3 4 5	
Conclusions match the results presented.	1 2 3 4 5	
Resident's interest and participation in project evident.	1 2 3 4 5	
Please provide additional comments that will help the presenter with future research.		