Informational Interview Presentation
Peer Evaluation Form

Presenter: _____ **Date:** _____

Please circle the term that BEST describes your perceptions of the presentation for each category:

Presentation

Clarity of Info Presented	Excellent	Good	Fair	Poor
Quality of Info Presented	Excellent	Good	Fair	Poor
Organization of Material	Excellent	Good	Fair	Poor
Effective Use of Language	Excellent	Good	Fair	Poor

Delivery

Enthusiasm	Excellent	Good	Fair	Poor
Comfort, Poise	Excellent	Good	Fair	Poor
Gestures/Posture/Mvt	Excellent	Good	Fair	Poor
Volume Level	Excellent	Good	Fair	Poor
Speech Rate	Excellent	Good	Fair	Poor

Impression

Professionalism	Excellent	Good	Fair	Poor
Preparation	Excellent	Good	Fair	Poor

Overall Evaluation	Excellent	Good	Fair	Poor

Please write comments below:

_____

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Name of Evaluator: _____