



Speech Evaluation Form for Students

Student Information

- Full Name: _____
- Class/Grade: _____
- Speech Topic: _____
- Date of Speech: _____

Evaluation Criteria

Content and Organization

- Introduction: Outstanding/Good/Needs Improvement
- Main Ideas: Clear/Needs Clarification
- Conclusion: Strong/Weak/Unclear

Delivery

- Voice Clarity: Clear/Muffled/Too Soft
- Pacing: Controlled/Rushed/Slow
- Confidence: Strong/Needs Improvement


Engagement

- Audience Eye Contact: Frequent/Occasional/Rare
- Gestures/Movement: Effective/Needs More/Distracting

General Comments

- Strengths: _____
- Suggestions for Improvement: _____

Teacher's Feedback

- 
- **Teacher's Name:** _____
 - **Signature:** _____
 - **Date:** _____