**Speaker Evaluation Form Template**

**Event Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Speaker’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Host Organization: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**1. Session Details:**

* **Title of Presentation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Duration of Session: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Mode of Delivery: ☐ In-Person ☐ Online ☐ Hybrid**

**2. Content Review:**

* **Relevance of the Topic: ☐ Excellent ☐ Good ☐ Average ☐ Poor**
* **Was the information new and insightful? ☐ Yes ☐ No**
* **Logical Flow of Content: ☐ Excellent ☐ Good ☐ Average ☐ Poor**

**3. Speaker Evaluation:**

* **Confidence and Professionalism: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Ability to Engage and Motivate the Audience: \_\_\_\_\_\_\_\_\_\_\_\_**
* **Clarity in Speech and Thought Process: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Response to Audience Queries: ☐ Excellent ☐ Good ☐ Fair ☐ Poor**

**4. Detailed Rating (1-5):**

| **Evaluation Criteria** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Preparation & Organization** | **☐** | **☐** | **☐** | **☐** | **☐** |
| **Knowledge of Subject** | **☐** | **☐** | **☐** | **☐** | **☐** |
| **Communication Style** | **☐** | **☐** | **☐** | **☐** | **☐** |
| **Interaction with Participants** | **☐** | **☐** | **☐** | **☐** | **☐** |
| **Use of Visual Aids** | **☐** | **☐** | **☐** | **☐** | **☐** |

**5. Open Feedback:**

* **What did you find most valuable in the session? \_\_\_\_\_\_\_\_\_\_\_**
* **What improvements would you suggest? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Final Recommendation:  
Would you recommend this speaker for future events? ☐ Yes ☐ No**

**Evaluator’s Name (Optional): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Signature (Optional): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**