**Speaker Evaluation Survey Form**

**Event Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Speaker’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Survey Completed By: ☐ Attendee ☐ Organizer ☐ Student**

**Session Overview:**

* **Topic: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Objective of the Session: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Duration: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Delivery Format: ☐ Lecture ☐ Workshop ☐ Panel Discussion**

**Evaluation Criteria (Rate from 1 to 5):**

| **Criteria** | **1** | **2** | **3** | **4** | **5** |
| --- | --- | --- | --- | --- | --- |
| **Clarity of Speech** | **☐** | **☐** | **☐** | **☐** | **☐** |
| **Relevance of Information** | **☐** | **☐** | **☐** | **☐** | **☐** |
| **Depth of Subject Knowledge** | **☐** | **☐** | **☐** | **☐** | **☐** |
| **Audience Interaction** | **☐** | **☐** | **☐** | **☐** | **☐** |
| **Time Management** | **☐** | **☐** | **☐** | **☐** | **☐** |

**Key Takeaways from the Session:**

**Open-ended Questions:**

1. **What did you like most about the session? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **Were there areas that needed more clarity? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
3. **Suggestions for future sessions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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