



Presentation Evaluation Form
(To be completed by school or organization)

In order to improve the quality and effectiveness of our presentations, we need your candid evaluation and comments. Please complete this form and return it to:

Emeline Alexis at Miami-Dade Transit Speakers' Bureau

Thanks for your help!

Name of Speaker: _____

Date of Presentation: _____

Location of Presentation: _____

Topic of Presentation: _____

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Please circle the appropriate response and add any additional comments:

- 1- Did this presentation cover what you had expected: _____yes _____no
- 2- Was it at the proper level for your group? _____too simple _____just right _____too advanced
- 3- Did your group seem interested in the presentation? _____yes _____no
- 4- Was the speaker easy to understand? _____yes- _____No
- 5- Speakers' knowledge of subject: ___poor ___fair ___good ___excellent
- 6- Was the printed material appropriate: _____yes _____no
- 7- Overall impression of presentation: _____
- 8- Suggestions for improvement: _____
- 9- Would your group like another speaker: _____yes _____no
- 10- Other topics or locations your group would be interested in:

