

Group Presentations: PEER REVIEW FORM

Reviewer's Name: _____

Group Number (circle it): 1 2 3 4 Date: _____

Title/Subject of **Presentation**: _____

Technical Merit: Poor Below Average Average Good Excellent

- Did you learn something new about the subject?
- Was subject covered in appropriate detail?
- Comments:

Presentation Style: Poor Below Average Average Good Excellent

- Was **presentation** organized and presented in a logical manner?
- Was **presentation** of appropriate length (not too short or too long)?
- Comments:

Addressing Learning Styles: Poor Below Average Average Good Excellent

- Were multiple intelligences respected in the presentation (i.e. visual material to help people with a dominant spatial intelligence, music or rhyme for people with dominant musical intelligence, etc.)
- Were use of presentation materials such as visual aids well planned and not distracting?
- Comments:

Further Comments or Suggestions:

What letter grade would you assign this presentation? _