

Presentation Feedback Form

Request peer critiques of your presentation

Presenter: _____ Date of this presentation: _____

Feedback provided by: _____

What area of the performance are you critiquing? *(Please check one focus area only):*

- Content:** key message, opening/closing, organization, clarity of ideas, supportive points, effective transitions
- Audience Engagement:** creativity, storytelling, questions, facilitation, rapport, interaction, humor
- Visual Support:** quality of slides, images, video, use of colors, use of white space, props
- Vocal Awareness:** breathing, projection, clarity of speech, pitch, pace, emphasis, pausing
- Body Language:** use of hands and supportive gestures, meaningful eye contact, stature, purposeful movement, looking at audience (not at slides), facial expressions
- Personal Presentation:** energy, passion for topic, confidence, personal appearance, smile

What did the presenter do well?

What could the presenter do differently to make it even better?

Other comments or suggestions:

MOTIVATED PRESENTER 

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