

Bullying.org Peer Power Bullying Awareness Week Presentation Evaluation

Presenters' School Name: _____

Presenters' School Contact Info. _____

Host School Name: _____

Host School Contact Info: _____

Date: November _____

Please use the following rating scale below:

1) Disagree strongly 2) Disagree 3) No Opinion 4) Agree 5) Agree Strongly

Preparation / Organization:

Were the presenters well prepared? 1 2 3 4 5

Were the objectives of the presentation clearly communicated? 1 2 3 4 5

Was the information well organized? 1 2 3 4 5

Delivery:

Could you hear and see the presenters clearly? 1 2 3 4 5

Did they maintain eye contact with the audience? 1 2 3 4 5

Did they have the audience's attention? 1 2 3 4 5

Did they use media effectively to support their points and ideas? 1 2 3 4 5

Attainment of Purpose:

Did they effectively communicate their knowledge of the topic? 1 2 3 4 5

Did they make you think about things that you had not before? 1 2 3 4 5

Have you been inspired to act because of this presentation? 1 2 3 4 5

Recommendation:

Would you recommend these presenters to others? 1 2 3 4 5

Overall Rating: (1 = lowest, 5 = highest) 1 2 3 4 5

Other Comments:

