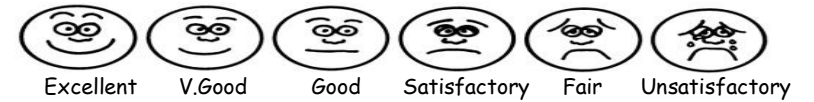








# PRESENTATION REVIEW FORM



DATE:	NAME(S):	TOPIC:
RATING SCALE		COMMENT
<p><u>STYLE</u></p> <p>Was the presentation fit for purpose?</p> <p>Was it visually appealing?</p> <p>Did it include a range of visuals (text/images/animations etc)?</p> <p>Was the size and type of font chosen appropriate for the audience?</p> <p>Was the colour scheme of the presentation appropriate for the room?</p>	<p> </p> <p> </p> <p> </p> <p> </p> <p> </p>	
<p><u>CONTENT</u></p> <p>Was there a clear structure (start, middle, conclusion)?</p> <p>Was the content relevant?</p> <p>Did the content meet the task requirements/answer the question?</p> <p>Was subject specific vocabulary used?</p>	<p> </p> <p> </p> <p> </p> <p> </p>	

<p>Were there any spelling or grammatical errors?</p>		
<p><b><u>DELIVERY</u></b></p> <p>Was the presenter positioned appropriately (e.g. not in the way of the presentation)?</p> <p>Was the tone and pitch of the presenter's voice clear?</p> <p>Did they make eye contact with a number of pupils?</p> <p>Did they speak to the audience during the presentation rather than just read notes?</p> <p><b>GROUP PRESENTATION:</b> Were all members of the group actively involved?</p>	    	
<p><b>PEER REVIEW COMMENTS</b></p>		
<p><b>TUTOR REVIEW COMMENTS</b></p>		
<p><b>TARGETS</b></p>	<p>1.</p> <p>2.</p>	
<p><b>FINAL REFLECTIONS (SELF)</b></p>		