

## **Evaluation Form**

Name			_ Age Da		
Address					
C4	Street		City	V	Zip
County Number of previous presentations:  County		Corrector	Years in 4-H District State		40
Number of previo Title of Presentation	_	s: County	DIST	iciSta	.te
J	on rea ( <i>If applicabl</i>	(a)			
Approximate leng			e): 5min.	7min. 10min.	15min.
Scoring Scale:	Outstanding	Above	Met	Needs	Omitted
2 · · ·	No room for Improvement	expectation for level	expectation for experience level	Improvement	Something Essential
	5	4	3	2	1
	_	-			
DELIV	ERY	EV	<b>ALUATOR'S</b>	COMMENTS	
Introduction					
Proper Equip	ment/ Visual Aids				
Efficient Orga	anization				
Proper Use of	f Notes/ Visual Aids				
Grammar/ Vo	ocabulary				
Appropriate I	Length*				
Gets Point Ac	cross				
Summary					
SUBJEC	CT				
Appropriate f	for Age & Experience	<b>?</b>			
Understandin	g of Subject				
Correct, Up-t	o-date Information/ S	Sources Given			
One Main Th	eme with Logical Ste	eps			
PRESEN	NTER				
Appearance (	Neat & Appropriate)	**			
Eye Contact					
Voice (Volun	ne & Rate)				
Posture					
Poise					
Enthusiasm					
Fielded Ques	tions Adequately				
EVALUATOR'S O	WEDALL COM	AENITS.			
EVALUATUR'S U	VEKALL COMI	VIENIS:			
EVALUATOR'S S	IGNATURE:		Tim	e: start	end

\*5 \*\*4 Update 5/05