**Presentation Feedback**

|  |  |  |
| --- | --- | --- |
| **Presentation by:** |  | |
| **Title of presentation:** |  | |
| **Structure** | **Strengths** | **Areas for improvement** |
|  |  |
| Beginning  Middle  End |  |  |
| **Presenter** | | |
| Body Language  Eye contact  Mannerisms  Energy / Enthusiasm  Engagment |  |  |
| **Voice** | | |
| Tone  Variation    Volume  Speed / Pace  Vocal fillers – Erms urms or Pauses |  |  |

|  |  |  |
| --- | --- | --- |
|  | **Strengths** | **Areas for improvement** |
| Question handling / opportunity |  |  |
| Any additional comments |  | |