

## **Evaluation Form**

Name	ame		_ Age Date of Birth			·
Address						
<b>C</b>	Street		City	<b>X</b> 7	4 TT	Zip
County Number of previous presentations:   County		Years in 4-H District Stat				
_	_	s: County	Dist	rict	State	2
Title of Presentation	on rea (If applicable					
Approximate leng			e): 5min.	7min.	10min.	15min.
Scoring Scale:	Outstanding	Above	Met		eds	Omitted
scoring scarev	No room for Improvement	expectation for level	expectation fo		vement	Something Essential
	5	4	3		2	1
	<u> </u>	-				
DELIV	ERY	$\mathbf{EV}$	<b>ALUATOR'</b>	S COMM	ENTS	
Introduction						
Proper Equip	ment/ Visual Aids					
Efficient Org	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	ources Given				
One Main Th	eme with Logical Ste	eps				
PRESEN	NTER					
Appearance (	Neat & Appropriate)	**				
Eye Contact						
Voice (Volum	ne & Rate)					
Posture						
Poise						
Enthusiasm						
Fielded Ques	tions Adequately					
EXALITATIONS	WEDALL COM	ATENITO:				
EVALUATOR'S O	VEKALL COMN	MEN 15:				
EVALUATOR'S S	IGNATURE:_		Tiı	ne: start	eı	nd

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