

## CONCURRENT SESSION EVALUATION FORM

Return to the NCURA Registration Desk or email to [king@ncura.edu](mailto:king@ncura.edu). Thank you!

Name of Session: \_\_\_\_\_

Date of Session: \_\_\_\_\_

Time of Session: \_\_\_\_\_

Room Location: \_\_\_\_\_

### PRESENTATION ORGANIZATION AND CONTENT

- |   |     |    |          |
|---|-----|----|----------|
| 1. Did the overall presentation flow effectively and logically?   | Yes | No | Somewhat |
| 2. Was the session content consistent with the title/description? | Yes | No | Somewhat |
| 3. Were the main points relayed clearly to the audience?          | Yes | No | Somewhat |
| 4. Was there sufficient time for questions?                       | Yes | No | Somewhat |
| 5. Did the presenters work well together?                         | Yes | No | Somewhat |

Additional Comments: \_\_\_\_\_

### MATERIALS/VISUALS

- |   |     |    |          |    |
|---|-----|----|----------|----|
| 1. The visual aids were effective (font size, amount of information per slide)? | Yes | No | Somewhat | NA |
|---|-----|----|----------|----|

Additional Comments: \_\_\_\_\_

### PRESENTATION STYLE FOR PRESENTER 1

PRESENTER # 1 NAME: \_\_\_\_\_

#### *VOICE*

- |  |     |    |          |
|--|-----|----|----------|
| 1. Was there variation in the presenter's voice?   | Yes | No | Somewhat |
| 2. Could the audience hear the presenter?          | Yes | No | Somewhat |
| 3. Did the presenter speak at an appropriate pace? | Yes | No | Somewhat |
| 4. Was the presenter engaging?                     | Yes | No | Somewhat |

#### *DELIVERY STYLE*

- |  |     |    |          |    |
|--|-----|----|----------|----|
| 1. Did the presenter make eye contact with participants?   | Yes | No | Somewhat |    |
| 2. Did the presenter repeatedly say 'umm,' 'OK,' or use other distracting fillers?                 | Yes | No | Somewhat |    |
| 4. Was each presenter prepared and the presentation delivered with confidence?                     | Yes | No | Somewhat |    |
| 5. Did the presenter listen to and respect participants, allowing a debate and challenge of ideas? | Yes | No | Somewhat | NA |

Additional Comments for Presenter # 1: \_\_\_\_\_

*continued on next page >*

**PRESENTATION STYLE FOR PRESENTER 2**

PRESENTER # 2 NAME: \_\_\_\_\_

*VOICE*

- |  |     |    |          |
|--|-----|----|----------|
| 1. Was there variation in the presenter's voice?   | Yes | No | Somewhat |
| 2. Could the audience hear the presenter?          | Yes | No | Somewhat |
| 3. Did the presenter speak at an appropriate pace? | Yes | No | Somewhat |
| 4. Was the presenter engaging?                     | Yes | No | Somewhat |

*DELIVERY STYLE*

- |  |     |    |          |    |
|--|-----|----|----------|----|
| 1. Did the presenter make eye contact with participants?   | Yes | No | Somewhat |    |
| 2. Did the presenter repeatedly say 'umm, 'OK,' or use other distracting fillers?                  | Yes | No | Somewhat |    |
| 4. Was each presenter prepared and the presentation delivered with confidence?                     | Yes | No | Somewhat |    |
| 5. Did the presenter listen to and respect participants, allowing a debate and challenge of ideas? | Yes | No | Somewhat | NA |

Additional Comments for Presenter # 2: \_\_\_\_\_

**PRESENTATION STYLE FOR PRESENTER 3**

PRESENTER # 3 NAME: \_\_\_\_\_

*VOICE*

- |  |     |    |          |
|--|-----|----|----------|
| 1. Was there variation in the presenter's voice?   | Yes | No | Somewhat |
| 2. Could the audience hear the presenter?          | Yes | No | Somewhat |
| 3. Did the presenter speak at an appropriate pace? | Yes | No | Somewhat |
| 4. Was the presenter engaging?                     | Yes | No | Somewhat |

*DELIVERY STYLE*

- |  |     |    |          |    |
|--|-----|----|----------|----|
| 1. Did the presenter make eye contact with participants?   | Yes | No | Somewhat |    |
| 2. Did the presenter repeatedly say 'umm, 'OK,' or use other distracting fillers?                  | Yes | No | Somewhat |    |
| 4. Was each presenter prepared and the presentation delivered with confidence?                     | Yes | No | Somewhat |    |
| 5. Did the presenter listen to and respect participants, allowing a debate and challenge of ideas? | Yes | No | Somewhat | NA |

Additional Comments for Presenter # 3: \_\_\_\_\_

**PRESENTATION STYLE FOR PRESENTER 4**

PRESENTER # 4 NAME: \_\_\_\_\_

*VOICE*

- |  |     |    |          |
|--|-----|----|----------|
| 1. Was there variation in the presenter's voice?   | Yes | No | Somewhat |
| 2. Could the audience hear the presenter?          | Yes | No | Somewhat |
| 3. Did the presenter speak at an appropriate pace? | Yes | No | Somewhat |
| 4. Was the presenter engaging?                     | Yes | No | Somewhat |

*DELIVERY STYLE*

- |  |     |    |          |    |
|--|-----|----|----------|----|
| 1. Did the presenter make eye contact with participants?   | Yes | No | Somewhat |    |
| 2. Did the presenter repeatedly say 'umm, 'OK,' or use other distracting fillers?                  | Yes | No | Somewhat |    |
| 4. Was each presenter prepared and the presentation delivered with confidence?                     | Yes | No | Somewhat |    |
| 5. Did the presenter listen to and respect participants, allowing a debate and challenge of ideas? | Yes | No | Somewhat | NA |

Additional Comments for Presenter # 4: \_\_\_\_\_

*\* If there were more than 4 presenters please use a 2nd sheet.*