Think about Thinking™

Presentation Evaluation

Presentation #_____

Mark the number in the answer range for each question.

1. Were the ideas in the presentation presented clearly?

1	2	3	4	5
Not at all!				Very much so!

2. Did you feel that presentation was helpful?

1	2	3	4	5
Not at all!				Very much so!

3. Will you be utilizing the ideas provided in the presentation?

1	2	3	4	5
Not at all!				Very much so!

4. Was the information in the presentation unique?

1	2	3	4	5
Not at all!				Very much so!

5. Was the presentation worth your time?

1	2	3	4	5
Not at all!				Very much so!

6. Did the presentation keep your attention?

1	2	3	4	5
Not at all!				Very much so!

7. Did the presentation improve your mood/state of mind?

1	2	3	4	5
Not at all!				Very much so!

8. Would you recommend this presentation to a friend?

1	2	3	4	5
Not at all!				Very much so!

9. Was it complete enough in supplying information?

1	2	3	4	5
Not at all!				Very much so!

Thank you for your time! Your thoughts are very respected and valued.

Any Suggestions?_____
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