

## GLPRC Presentation Evaluation Form

**Presentation Title:** \_\_\_\_\_

**Attendance Session Code:** \_\_\_\_\_

**Speaker:** \_\_\_\_\_

**UAN #:** \_\_\_\_\_

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Comments
<b>Speaker Evaluation</b>						
The speaker maintained appropriate eye contact throughout the presentation.						
The presenter spoke in a strong voice at an appropriate pace throughout the presentation.						
The slides were visually appealing, easy to read, and contained no spelling errors.						
The speaker was clearly knowledgeable on the topic presented.						
The speaker actively engaged the audience in this learning activity.						
The speaker adequately answered questions and provided clarification when necessary.						
It was evident that the resident had direct and substantial involvement in the project/study.						
The presentation was unbiased and provided a fair balance of information. Specific products were referred to by a generic or chemical name and the speaker did not appear to be promoting a product or company.						
<b>Overall Presentation Quality</b>						
The program was organized and presented in a logical fashion.						
The knowledge gained at this program will be applicable to my daily practice.						
The program met my expectations based on the learned objectives.						
Overall, I gained new information and knowledge on the subject presented.						
The program subject and degree of detail were appropriate for the audience.						
The program subject and degree of detail were appropriate for the time allotted.						
<b>Presentation Content</b>						
The presentation topic was current and relevant to the practice of pharmacy.						
Specific and measurable learning objectives were stated.						
The purpose of the study/project was clearly stated.						
Study/project methods were clearly stated and appropriately applied to the given topic.						
Results (or preliminary results) were provided and discussed in sufficient detail.						
Stated conclusions were appropriate given the design, results, and current practice standards.						

The program was completed in the appropriate time frame (18 - 22 minutes).

YES

NO

Reviewer's Name: \_\_\_\_\_ Reviewer's Specialty: \_\_\_\_\_

**Please give white copy to your speaker and keep yellow copy for your records.**