

MILLIKIN UNIVERSITY POSTER SYMPOSIUM

EVALUATION FORM

**PLEASE NOTE: THIS FORM WILL BE GIVEN TO THE PRESENTER
AFTER THE EVENT TO PROVIDE FEEDBACK**

Poster Number: _____ Name of Judge: _____

Please mark the score for each evaluation criterion below. When you are finished, combine the total points at the bottom for the overall score.

	Poor	Fair	Average	Good	Excellent
Content					
Clarity of content	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Quality of content (background, methodology, findings, etc.)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Originality and complexity of project	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Significance of project (to field of study, community, etc.)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Supports main points					
<i>Comments on Poster Content:</i>	Content Points = _____ / 25				

Organization					
Layout (organized, effective, professional, captures interest)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Appropriate font size and use of visual aids	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Important information is readily available and easy to grasp	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Clearly identified topic and purpose	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Informative and clear project summary	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
<i>Comments on Poster Organization:</i>	Organization Points = _____ / 25				

Delivery					
Professional and confident	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Engaged with audience	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Clear voice with good pace	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
Command of language/avoiding jargon	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
<i>Comments on Delivery:</i>	Delivery Points = _____ / 20				

Visual Quality of the poster	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
	Overall Impression Points = _____ / 5				

Comments: _____ **TOTAL SCORE** = _____ / 75
What were the strengths of this poster/presentation?

Do you have any suggestions for improvement?

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Name of Judge: _____

Considering all the posters you evaluated, please rank the posters in order from 1-5 below with 1 being the highest rank, and 5 being the lowest. Please place the poster number in the spaces below.

**Should this poster win
an award?**

Poster #: _____ Judge's Ranking: _____ Yes | No

Poster #: _____ Judge's Ranking: _____ Yes | No

Poster #: _____ Judge's Ranking: _____ Yes | No

Poster #: _____ Judge's Ranking: _____ Yes | No

Poster #: _____ Judge's Ranking: _____ Yes | No

Additional Comments: