End of the Year Project Evaluation Form

Topic:                                              Name: _____

Visual Aid Type:                          Period: _____

                                                      Date of Presentation: _____

| | Outstanding | | | Above Average | | | Average | | | Below Average | | | Poor |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 40 | 37 | 35 | 30 | 27 | 25 | 20 | 17 | 15 | 10 | 7 | 5 | F |
| Delivery: Enthusiasm, Eye Contact, Expressiveness, Receptiveness, Are you interested in what you are doing? | | | | | | | | | | | | | |
| Visual Aid: Effort, Effectiveness, Added to Student Learning | | | | | | | | | | | | | |
| Research/Works Consulted Page Included? Proper MLA Format? | | | | | | | | | | | | | |

Comments:

Overall Grade _____/100