

Evaluation Form for Speeches

Speaker's Name: _____

Speech Title: _____

Evaluator (your name): _____ Date _____

General Element	Specific Element	Needs Polish	Very Good	Hit Jackpot
CONTENT	Relevant for Audience			
	Clear Purpose			
	Met Purpose/Objectives			
ORGANIZATION	Introduction, Body, Conclusion			
	Easy to Follow Speech Flow			
DELIVERY	Introduction by Toastmaster			
	Passion / Conviction			
	Relaxed / Confident			
	Voice Projection, Speed, Variety			
	Eye Contact			
	Gestures / Stage Movement			
	Use of Visual Aids, If Used			

PIP = PRAISE + IMPROVE + PRAISE

P – Take Away / Value Received

I – My Suggestions for Improvement

P – What I liked Best

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