

Sixth Degree Project Evaluation Form

Presenter's name: _____ Member's number: _____

Address: _____

City/State/Zip: _____

Home phone number: _____ Cell phone number: _____

This evaluation is being submitted by:

Name: _____

Address: _____

City/State/Zip: _____

Are you a member of ESA? _____

Date project presented: _____ How many people attended: _____

Describe the audience's reaction to the project:

Are the materials that were used suitable for other meetings and presentations? _____

Describe your reaction to the project:

List the strengths of this project:

List suggestions for the project:

Is this project worthy of significant recognition within the community or within ESA?

Please explain.

Do you think your feelings reflect the overall response of the audience?

Please explain.

Signature: _____ Date: _____