International Cultural Service Program Speaker Evaluation Form

Student Presenter Name(s) ____________________________________________

Presentation date ___________________ Audience Group ______________________

Organization/Class Visited ______________________________________________

Evaluator's Name ___________________ Contact number ______________________

Presentation topic ______________________________________________________

How long was the presentation? __________________________________________

Three things that you think went really well:

Three things you realized we could do differently next time:

Any other thoughts and ideas that came out of this:

The form could be given to the ICSP presenter in a sealed envelope or it can be emailed to Nan Xie at nan.xie@oregonstate.edu, or mailed to Suite 130, 1600 SW Western Blvd., University Plaza, Oregon State University, Corvallis, OR 97331.

Thank you so much for your time to share your valuable feedback with us! Look forward to working with you more in the future!