

Speech Evaluation Sheet	
Speaker:	Date:
Title/Topic:	Your Name: <i>(optional)</i>
Instructions: The formal evaluator will focus on the objectives of the speech. Your evaluation should focus on the mechanics of the speech, listed below: <ul style="list-style-type: none"> ● APPEARANCE: Motion, Gestures, Eye Contact, Preparation of speech ● NERVOUSNESS: Voice, Body Movements, Use of notes, Apologizing ● STRUCTURE: Statement of objectives, Flow, Use of examples ● VISUAL AIDS: Props, Audio, Visual 	
POSITIVE NOTES: <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	
CONSTRUCTIVE NOTES: <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	

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Ballot Sheet
Best Functionary: <i>(vote for one)</i> <input type="checkbox"/> Ah Counter _____ <input type="checkbox"/> Grammarian _____ <input type="checkbox"/> Timer _____
Best Performer: <i>(vote for one)</i> <input type="checkbox"/> Toastmaster _____ <input type="checkbox"/> Table Topics Master _____ <input type="checkbox"/> General Evaluator _____
Best Table Topics Speaker: <i>(write all names in order; vote for one)</i> <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
Best Speech Evaluator: <i>(write all names in order; vote for one)</i> <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
Best Speaker: <i>(write all names in order; vote for one)</i> <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____