

OSPA Feedback Form for Information

Please note: All evaluations must be submitted using the OSPA online platform.

Your Name:

Presentation Information

1. Presenter Name:

2. Abstract ID Number (For example: A12C-01):

Presentation Visuals

3. Appealing Design and Layout

0 being the lowest score (poor) and 5 being the highest score (outstanding)

0 1 2 3 4 5

4. Appropriate Use of Tables or Figures

0 being the lowest score (poor) and 5 being the highest score (outstanding)

0 1 2 3 4 5

5. Logical Visual Flow Throughout Materials

0 being the lowest score (poor) and 5 being the highest score (outstanding)

0 1 2 3 4 5

6. Quality of Formatting (Fonts, Color, Sizing)

0 being the lowest score (poor) and 5 being the highest score (outstanding)

0 1 2 3 4 5

7. Presentation Visuals Feedback

Please enter feedback directly for participants related to their presentation visuals:

Scientific Approach

8. Organization and Logic

0 being the lowest score (poor) and 5 being the highest score (outstanding)

0 1 2 3 4 5

9. Appropriate Use of Data and Analysis

0 being the lowest score (poor) and 5 being the highest score (outstanding) Required to answer. Single choice.

0 1 2 3 4 5

10. Appropriate Comprehension/Knowledge of Field

0 being the lowest score (poor) and 5 being the highest score (outstanding)

0 1 2 3 4 5

11. Coherence of Conclusion/Findings

0 being the lowest score (poor) and 5 being the highest score (outstanding)

0 1 2 3 4 5

12. Creative Expression of Research/Originality

0 being the lowest score (poor) and 5 being the highest score (outstanding)

0 1 2 3 4 5

13. Demonstrates Understanding of Project Significance

0 being the lowest score (poor) and 5 being the highest score (outstanding)

0 1 2 3 4 5

14. Feedback for Participant

0 being the lowest score (poor) and 5 being the highest score (outstanding)

0 1 2 3 4 5

Overall Feedback for Participants

18. Describe strengths of the participant's presentation. Include at least one strength related to their presentation skills:

19. Describe any areas where the participant has room for improvement. Include at least one suggestion for improvement:

20. Enter overall feedback for the participant here: