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Lectures

Day

Time

Lecture Title

Speaker 1

<i>Overall Impression (Please Circle Your Answer):</i>	<u>Lowest</u>				<u>Highest</u>
Your Level of Interest in this Topic	1	2	3	4	5
Your Knowledge of the Topic Prior to the Lecture	1	2	3	4	5
Your Knowledge/Understanding of the Topic Following the Lecture	1	2	3	4	5
Comprehensiveness of Lecture Content	1	2	3	4	5
Lecturer's Engagement with Audience	1	2	3	4	5
The Length of the Lecture Was Appropriate	1	2	3	4	5

Additional Comments:

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Speaker 2

<i>Overall Impression (Please Circle Your Answer):</i>	<u>Lowest</u>				<u>Highest</u>
Your Level of Interest in this Topic	1	2	3	4	5
Your Knowledge of the Topic Prior to the Lecture	1	2	3	4	5
Your Knowledge/Understanding of the Topic Following the Lecture	1	2	3	4	5
Comprehensiveness of Lecture Content	1	2	3	4	5
Lecturer's Engagement with Audience	1	2	3	4	5
The Length of the Lecture Was Appropriate	1	2	3	4	5

Additional Comments:

Speaker 3

<i>Overall Impression (Please Circle Your Answer):</i>	<u>Lowest</u>				<u>Highest</u>
Your Level of Interest in this Topic	1	2	3	4	5
Your Knowledge of the Topic Prior to the Lecture	1	2	3	4	5
Your Knowledge/Understanding of the Topic Following the Lecture	1	2	3	4	5
Comprehensiveness of Lecture Content	1	2	3	4	5
Lecturer's Engagement with Audience	1	2	3	4	5
The Length of the Lecture Was Appropriate	1	2	3	4	5

Additional Comments: