

Evaluation Sheet

Date : _____ Group : _____

Topic : _____

Evaluator : _____

Parameter	Weightage	C1	C2	C3	C4	C5	C6	C7	C8	C9	C10
Content Subject Knowledge											
Creativity and Originality											
Voice Tone and pitch											
Body Language Posture Eye contact											
Analytical ability											
Ability to conclude											
Initiative											
Leadership											
Group Behavior											
Enthusiasm											
Listening											

ii. Rating

1	2	3	4	5	6	7
WORST	VERY BAD	BAD	NEUTRAL	GOOD	V. Good	EXCELLENT