



University Trainer Appraisal Form


 Membership Enhancement
 Rider Education and Safety

 Training
 Officer Certification Program

Presenter _____ Member # _____

Appraiser _____ Member # _____

Seminar Title _____

Content:
 Were key ideas presented clearly?
 Was the presentation well organized?
 Was the presentation interesting?

Demonstrated	Not Demonstrated

Platform Skills:
 Speaker's Appearance
 Eye Contact
 Gestures (Used Appropriately)
 Appropriate choice of words
 Comfortable in the setting
 Rapport With Audience
 Visual Aids (Skillful use of)
 Enunciation

Delivery:
 Tempo: Too Fast _____ Just Right _____ Too Slow _____
 Volume: Too Loud _____ Just Right _____ Too Low _____
Specific comments are required for items marked Not Demonstrated:

Use the reverse if necessary
 Approved

 Not Approved

Signature _____ Date _____

Send completed form to District Trainer