

**Departments of Biomedical Sciences
Graduate Seminar
Seminar Evaluation**

Name of Student: _____ **Date:** _____

Seminar (please circle): MSc PhD PDF

1st 2nd 3rd or other

Evaluator role (please circle one): Faculty
 Student
 Staff

Evaluator Name (optional): _____

To evaluators: Evaluations are for **formative** feedback and your evaluation assists the speaker in preparing future presentations. Please provide specific written comments in the space provided below AND a **final mark out of 10.**

Specific areas of strength in this presentation:

Specific areas that could be improved in this presentation:

MARKS = /10



if you wish to be included on the Hospitality Card draw (\$25 for students; \$10 for faculty & staff, please print your name, tear off and submit. Winners will be drawn at the end of the seminars)