

SEMINAR REVIEW FORM

Student Name:			Student ID#:			Program: □ MSc □ PhD			
Seminar Number: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 additional									
SEMINAR INFORMATION		T							
Date:			Location:						
Presenter:			Organizer:						
Title / Topic:									
SEMINAR RATING									
	STRONGLY DISAGREE				STRONGLY AGREE				
The speaker provided sufficient background information		□ 1	□ 2	□ 3		□ 4	□ 5	□ N/A	
The importance of the subject matter was explained		□ 1	□ 2	□ 3		4	□ 5	□ N/A	
New, up-to-date information was presented		□1	□ 2	□ 3		4	□ 5	□ N/A	
Clear explanations were provided		□ 1	□ 2	□ 3	Ε	4	□ 5	□ N/A	
The speaker spoke clearly		□ 1	□ 2	□ 3		4	□ 5	□ N/A	
Easy-to-understand audio-visuals were used		□ 1	□ 2	□ 3		4	□ 5	□ N/A	
Questions were answered well		□ 1	□ 2	□ 3		4	□ 5	□ N/A	
The speaker stimulated discussion		□1	□ 2	□ 3		□ 4	□ 5	□ N/A	
This presentation taught me something		□ 1	□ 2	□ 3		□ 4	□ 5	□ N/A	
SUMMARY									
Overall evaluation of the seminar: □ Poor □ Acceptable □ Good □ Very Good □ Excellent									
Please briefly summarize the seminar presentation (maximum 750 characters, or approximately 100 words).									
PLEASE SIGN									
Student:				Date:					
Supervisor(s):				Date:					