

# Oral Presentation Assessment Sheet

## Language Arts

Student Name:

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Date:

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Topic:

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Criteria	Excellent	Good	Fair	Needs Improvement
Content & Organization Clear focus, logical structure, well-developed ideas.				
Delivery Eye contact, gestures, volume, pace, confidence.				
Language Use Appropriate vocabulary, grammar, clarity.				
Visual Aids Effective use of visuals to support the presentation.				
Engagement Audience interest, interaction, impact.				
Total / Grade				

Teacher Comments: