

Name:

Date:

Class:

## Presentation Peer Review

Feedback for: \_\_\_\_\_ Feedback from: \_\_\_\_\_

What are two things you liked about their presentation? \_\_\_\_\_

\_\_\_\_\_

What is one suggestion you have to make their presentation better? \_\_\_\_\_

\_\_\_\_\_

What are two things you liked about their design? \_\_\_\_\_

\_\_\_\_\_

What is one suggestion you have to make their design better? \_\_\_\_\_

\_\_\_\_\_

Other comments: \_\_\_\_\_

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