GROUP NUMBER PRESENTING: ________________

PROJECT TITLE: _____________________________________________________________

**Project Evaluation**: Please rank the project using the following categories and points range.

1) Technical difficulty of project (0-10):  _____

2) Problem understanding by the group (0-10):  _____

3) Quality of Problem Solving Methods (0-10):  _____

4) Design and implementation efficiency (0-10):  _____

5) Apparent distribution of work within the group (0-10):  _____

**Presentation Evaluation**: Please rank the presentation using the following categories and points range.

6) Project definition and specification presentation (0-10):  _____

7) Problem understanding by the group (0-10):  _____

8) Presentation of technical design by each member (0-10):  _____

9) Presentation of administrative content (0-10):  _____

10) Overall presentation effectiveness (0-10):  _____

**TOTAL:**  _____

Remarks (if any):

Reviewer's Name and group number: ________________________________