Year in Spanish:  \_\_\_\_\_\_\_\_     School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Item: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Presenter:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Do NOT write below this line**

STARTING TIME: \_\_\_\_\_\_\_\_      FINISH TIME:   \_\_\_\_\_\_\_\_  TOTAL TIME: \_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| TOTAL  TIME | 0:00-0:29 | 0:30-0:59 | 1:00-1:29 | 1:30-1:59 | 2:00-3:00 | 3:01-3:30 | 3:31-4:00 | 4:01-4:30 | 4:31&Up |
| POINTS  OFF | -20 | -15 | -10 | -5 | No penalty! | -5 | -10 | -15 | -20 |

DISQUALIFIED IF NOTES ARE USED         DQ

TOPIC                                                            terrible         average            WOW

            interesting                                           1          2          3          4          5           
            well explained                                     1          2          3          4          5

PRESENTATION

            language:  pronunciation                     1          2          3          4          5  
                             grammar/usage                  1          2          3          4          5  
            projection (loud/clear)                          1          2          3          4          5  
            eye contact                                          1          2          3          4          5  
            professionalism                                   1          2          3          4          5  
(posture, body language, etc.)

ANSWERS TO QUESTIONS                         1          2          3          4          5

SUBTOTAL of 40 \_\_\_\_\_\_\_

Minus penalty points for time \_\_\_\_\_\_\_

                                                                              GRAND TOTAL of 40 \_\_\_\_\_\_\_

Names of Judges:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_