

**\*\*Copy and paste form as many times as necessary\*\***

## Peer Speech Practice Feedback

Complete this form as you listen to your classmate's Speech. Check off when you hear the following:

**Peer Name:**

Attention grabber	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Supporting evidence	Yes <input type="checkbox"/>	No <input type="checkbox"/>
States an issue	<input type="checkbox"/>	<input type="checkbox"/>	Presents a vision	<input type="checkbox"/>	<input type="checkbox"/>
Explains issue	<input type="checkbox"/>	<input type="checkbox"/>	Call to action	<input type="checkbox"/>	<input type="checkbox"/>
Rhetorical devices	<input type="checkbox"/>	<input type="checkbox"/>	Closer	<input type="checkbox"/>	<input type="checkbox"/>

Was the speaker passionate about the issue? How could you tell?

What did the speaker do well?

What could be improved?

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