

Your Name \_\_\_\_\_

## VIDEO EVALUATION

Name and # of video program \_\_\_\_\_

This form should be completed after viewing the televised program. Each form is worth 10 points toward your overall semester grade and should be turned in at the next scheduled seminar meeting.

I. **Fact Section**

List below 3 specific facts that you felt were important from this video program. Write each fact in a complete sentence.

1. \_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_

3. \_\_\_\_\_  
\_\_\_\_\_

II. **Personal Reaction Section**

Write two or three sentences about your personal reaction to this video. You may give your overall impression, select something that surprised you or that you agreed or disagreed with or that reminded you of an experience you have had.