

FOREST GLEN BIBLE CAMP

STORY-TELLING *Evaluation Form*

Title of Story: _____

Target Age Group: _____

Circle one: Visual-aided Story / Non-visual-aided Story

Name: _____

Age: _____ **Phone:** _____

Address: _____

Church: _____

Pastor: _____

FACTORS EVALUATED	COMMENTS	POINTS
PRESENTATION: a. Approach and Departure (5 pts.) b. Poise and Confidence (10 pts.) c. Facial expression (5 pts.) d. Enthusiasm (5 pts.)		
COMMUNICATION: a. Voice inflection & Characterization (10 pts.) (How well does the participant use her voice to make the story interesting and keep the attention of the children?) b. Articulation & Pronunciation (10 pts.) c. Memory lapses & recovery (5 pts.) d. Use of Visual aids (10 pts.) (This is only applicable to Visual-aided Story Category)		
SELECTION: a. Flow of ideas: conflict & climax (10 pts.) (does the story keep the listener interested?) b. Worthwhile message (10 pts.) (is the message or theme of the story an important Biblical principle?) c. Effectiveness of narrative (15 pts.) (does the story present the Biblical principle/message in an effective way?) d. Originality (5 pts.)		
TOTAL POINTS (* out of 90 pts possible) →		

_____ (adjudicator's signature)

* **Note:** This evaluation will be judged out of **100 points** possible if it is a **Visual-aided Story**.