

EXHIBIT BAmerican Academy of Family Physicians
SCIENTIFIC EXHIBIT EVALUATION FORM

Senior Exhibitor _____

Exhibit Title _____

Meeting _____

Exhibit Number _____

	Excellent (8)	Good (6)	Fair (4)	Poor (2)
I. Value to Family Practice	_____	_____	_____	_____
	Excellent (4)	Good (3)	Fair (2)	Poor (1)
II. Educational Value	_____	_____	_____	_____
(purpose, conclusions)	Excellent (4)	Good (3)	Fair (2)	Poor (1)
III. Appearance or Format	_____	_____	_____	_____
(clarify, design, esthetic value)	Excellent (4)	Good (3)	Fair (2)	Poor (1)
IV. Scientific Content	_____	_____	_____	_____
(valid, properly structured, timely)				
Subtotals	_____	_____	_____	_____

TOTAL: _____ points out of a possible 20 points.

Exhibitor staffing: Needed _____ Not Needed _____ Exhibitor present: Yes _____ No _____

(Evaluator's name)