# ITP411 : FINAL DEFENSE EVALUATION FORM

|  |  |
| --- | --- |
| TEAM MEMBERS NAMES: ROYCE D. OGOT | |
| PROJECT TITLE: ALLCaps: Capstone Project Team Monitoring System | |
| DATE OF DEFENSE March 28, 2023 | TIME 5:30 – 6:30 |
| NAME OF PANELIST | SIGNATURE |
| End-user/BeneficiaryVon Denuelle Tandoc |  |
| IT ProfessionalChris Allen Pineda |  |
| Program Coordinator  1. **Joseph Angelo Pusing** |  |
| PROJECT ADVISERLoudel M. Manaloto |  |
| College Dean/Class Adviser  1. **Erlinda C. Abarintos** |  |

# PURPOSE OF EVALUATION

# The Final Defense Evaluation Form is a means to analyze and evaluate the project in the context of content, form, methodology, software, and presentation of students by the panel members assigned to the group. The quantitative rating given by the panel member is to be used as a guide for the recommendation or final evaluation at the end of the system defense. The Lead Panelist, together with the Instructor may veto any decision of the local panelists.

# INSTRUCTIONS TO THE EVALUATOR

Place a check mark at the appropriate box given the following evaluation scores:

|  |  |
| --- | --- |
| **5** | 96 – 100 –Excellent |
| **4** | 91 – 95 - Very Good |
| **3** | 87 – 90 - Good |
| **2** | 84 – 86 - Passed |
| **1** | below 84- Failed |

# PANELIST LIST OF QUESTIONS FORM

|  |  |
| --- | --- |
| PROJECT TITLE ALLCaps: Capstone Project Team Monitoring System | |
| TEAM Name DGR8 | |
| DATE OF DEFENSE March 28, 2023 | TIME 5:30 - 6:30 |
| NAME OF PANELIST | SIGNATURE |

Indicate the questions you intend to ask the presenter. Questions may include but are not limited to the system document contents, requirements, analysis, design and programming of the software. Please indicate short comments, which will serve as your evaluation of the response(s) given to the question.

|  |  |
| --- | --- |
| Questions | Comments |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

**PRESENTATION EVALUATION FORM**

|  |  |
| --- | --- |
| PROJECT TITLE ALLCaps: Capstone Project Team Monitoring System | |
| DATE OF DEFENSE March 28, 2023 | TIME 5:30 - 6:30 |
| PANELIST | SIGNATURE OF PANELIST |

The panelist gives comments on how the student presenter performed during the defense.

# INSTRUCTIONS TO THE EVALUATOR

Place a check mark at the appropriate box given the following evaluation scores:

|  |  |
| --- | --- |
| **5** | 96 – 100 - Excellent |
| **4** | 91 – 95 - Exceeds Expectations |
| **3** | 87 – 90 - Meets Expectations |
| **2** | 84 – 86 - Meets Expectation sometimes |
| **1** | Below 84 - Does not Meet Expectations |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | | | | | |
| I. COMMUNICATION SKILLS | **5** | **4** | **3** | **2** | **1** |
| 1. Voice Projection (distance reached) |  |  |  |  |  |
| 2. Voice Modulation (pleasantness of voice) |  |  |  |  |  |
| 3. Diction/Pronunciation |  |  |  |  |  |
| 4. Grammar/Syntax; Understandability |  |  |  |  |  |
| 5. Professionally Dress |  |  |  |  |  |
|  |  |  |  |  |  |
| II. WORK ORGANIZATION |  |  |  |  |  |
| 6. Preparedness |  |  |  |  |  |
| 7. Ability to present the assigned topic(s) clearly |  |  |  |  |  |
| 8. Participation in the defense |  |  |  |  |  |
|  |  |  |  |  |  |
| III. EFFECTIVENESS |  |  |  |  |  |
| 9. Ability to answer questions |  |  |  |  |  |
| 10. Ability to convince the panelists of the ideas being presented |  |  |  |  |  |
|  |  |  |  |  |  |
| Other Comment(s): |  |  |  |  |  |

**REVISION LIST FORM**

|  |  |
| --- | --- |
| PROJECT TITLE ALLCaps: Capstone Project Team Monitoring System | |
| TEAM Name DGR8 | |
| DATE OF DEFENSE March 28, 2023 | TIME 5:30 - 6:30 |
| LEAD PANELIST | SIGNATURE |

The following revisions need to be complied with by the student. Further evaluation on the project will be done depending on the indicated result in the Recommendation Sheet.

|  |
| --- |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

**RECOMMENDATION SHEET**

|  |  |
| --- | --- |
| PROJECT TITLE ALLCaps: Capstone Project Team Monitoring System | |
| TEAM Name: DGR8 | |
| DATE OF DEFENSE March 28, 2023 | TIME 5:30 - 6:30 |
| PANELIST NAME | SIGNATURE |

### RECOMMENDATION



**4.75 – 5.0** CONDITIONAL PASS WITH NO REVISION



**4.0 – 4.74** CONDITIONAL PASS WITH MINOR REVISION\*

to be checked by the Instructor



**3.0 – 3.99** CONDITIONAL PASS WITH MAJOR REVISION\*

with a re-demonstration of the software

\*Revisions needed to be complied with are in the Revision List Form.



**2.0 – 2.99** REDEFENSE



**1.0 – 1.99** FAIL\*\*

Indicate the names of students who failed (no listing means all members of the group)

|  |  |
| --- | --- |
|  |  |
| \*\*Reason(s) for failure: | |
| Incompleteness of the output  Incorrectness of the output  Non-original (copied from existing sources)  Output(s)/deliverable(s) were made by individuals other than members of the group  Others (specify): | |
| \*\*Condition(s) of failure: | |
| Change the entire project by submitting a new proposal for approval  Continue working on the same topic including the necessary revisions and requirements  Others (specify): | |