



Self-Reflection Form

Name:
Speech:

Date:

Check the appropriate space to indicate if you experienced any of these reactions as you presented your speech.

Physical Symptoms

Before		After
	Heart pounding	
	Constriction of throat	
	Voice not normal? (How?)	
	Trembling? (Where?)	
	Feeling too warm, face flushed, blushing	
	Dry mouth	
	Increased perspiration	
	"Butterflies" in the stomach	
	Other (describe)	

Physical Preparation

	Got a good night's sleep
	Limited my caffeine
	Consciously relaxed
	Ate sensibly

Mental Preparation

	Knew physical symptoms were normal
	Took preparation and rehearsal time
	Assumed my audience was positive
	Assured myself I would do OK
	Thought how interesting my topic was
	Focused on my personal strengths
	Keep the speech in perspective
	Visualized myself giving a great speech

1. I noticed that my listeners
2. Other speakers
3. My goals for this speech were
4. In this speech, my strengths were
5. In this speech, my weaknesses were
6. For my next speech, I will
7. Based on General Grading Criteria, for this speech, I earned this grade