

PowerPoint Assessment

Please check off the amount of knowledge you have with each topic listed. Make additional notes if required.

| | | | |
|--|-----------------------------|---------------|--|
| Name: | | Company Name: | |
| Position: | | Email: | |
| How many years have you used this program? | What version are you using? | | |

On a Scale of 1 to 10, how comfortable are you with this program?

1 = Not comfortable, no experience

10 = Very comfortable, I could teach it!

1 2 3 4 5 6 7 8 9 10

What do you struggle with the most (with this program)?

Introductory Level

| Topic | No, Never | Sometimes | Yes, Always |
|--|--------------------------|--------------------------|--------------------------|
| Have you created a PowerPoint presentation from scratch? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you created a PowerPoint presentation with Templates? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you edited an existing PowerPoint presentation? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you added speaker notes to a presentation? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you use the Slide Sorter View? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you worked in Outline mode? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Can you change the overall Design of your slide show? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you added Images / Graphics to a presentation? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you added Charts to a presentation? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you added Charts linked from Excel to a presentation? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you added Media to a presentation? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you create Transitions on your slides? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Do you add Animations to your slides? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Send Completed Forms to mission@xplornet.com

PowerPoint Assessment

Please check off the amount of knowledge you have with each topic listed. Make additional notes if required.

| Topic | No, Never | Sometimes | Yes, Always |
|--|--------------------------|--------------------------|--------------------------|
| Do you create a Slide Master for your PowerPoints? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you created a Notes Master? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you created a Handout Master? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you converted your Slide Show into a Video? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Do your PowerPoint presentations look good? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Other Notes, areas that you want to specifically learn more about:

Click or tap here to enter text.

From time to time we send out a Newsletter with valuable tips and tricks. This is a great way to extend your learning. Please check this box & sign below to authorize us to include you in our mail-outs.

Click or tap here to enter text.

Signature

Click or tap here to enter text.

Date