Peer Feedback Slip

Date: _____

Name of Problem Solver: _____   Initials of Feedback-Giver: _____

Name of Problem: _____

While listening to the Problem Solver's idea, check-off the items that you think still need his or her attention and/or the things you notice about the idea:

_____ the idea is unique   _____ the idea is detailed

_____ the idea is too simple   _____ the idea captures my interest

_____ the idea improves the situation   _____ the idea is easy to understand

_____ the idea is focused on the problem   _____ the idea should be improved

_____ the idea sounds like something that is already happening

Here are some suggestions for your idea:

_____

_____

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