# Abstract Evaluation Form

| Abstract number | Evaluation | | | | Total (4-20) |
|---|---|---|---|---|---|
| | Argumentation (1-5) | Presentation (1-5) | Originality (1-5) | Overall opinion (1-5) | |
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**Note:** 1=lowest score, 5=highest score.
If you wish to make any further comments, please provide the abstract number and your comments in the space below.

**Comments**