TEAM NAME:	
TEAM NAME:	

**Scoring:** 1= Horrible/Not Really 2=Poor/Somewhat 3=Okay/On to something 4=Good/Really close 5=Excellent/Nailed it

Criteria	Score	Feedback/Comments
Problem Identified (Value Proposition)		
Customer Identified (Customer Segment)		
Solution identified (Innovation/ Creativity of solution)		
Market size/Go to market/Revenue model		
Social Impact		
Presentation/Story		
Total		