# **Peer feedback**

Name of Director:

|  |  |
| --- | --- |
| **What worked well?**  **Consider:**  Framing  Selection & variety of shots  Camera movements  Pace of the edit  Use of text  Voice over |  |
| **What could have been better?**  **Consider:**  Framing  Selection & variety of shots  Camera movements  Pace of the edit  Use of text  Voice over |  |
| **Additional Comments** |  |