



**Faculty of Medicine
Assiut University
Research proposal granting evaluation form (2013)**

Project Title:
Project Number:
Date:

Based on your evaluation please fill the following form (Full mark is 70 points):

Please refer to the attached sheet (directions for evaluation) for the details of the each of the points bellow

EVALUATION	0	1	2	3	4	5
Originality						
Scientific Merit						
Relevance to Assiut/Egypt						
Qualifications of Investigator/s						
Methodology						
Importance of the outcome and liability for publication						
Relevance to department and faculty research plans						
Sample size estimation						
Budget						
Clarity of proposal						
Feasibility						
Number of researchers						
*Sharing with other departments						
**Including postgraduate students (Point for each included student)						
Total						

Comments on the proposal

Suggestion for Improvement of the research proposal:

C) Please give your general recommendation:

_____	Acceptance (more than 50 points)
_____	Acceptance with revision (40-50 points)
_____	Extensive revision needed before decision can be made (30-40 points)
_____	Rejection (less than 30 points)
<ul style="list-style-type: none">• Accepted proposals will compete for funding depending on the total points• Proposals other than those finally accepted will be retained to the researchers with suggestions for improvement from the reviewers.	

Reviewer's Name:	Address:
Reviewer's Signature	Date

REVIEWER'S DETAILS:

Please return the completed form within three (2) weeks to the Research Grants Office, Academic building, Faculty of Medicine, Assiut university, Fifth floor

Grants Office
Tel: 241/3683
Fax: 2360606
Email: qaaunit@yahoo.com