



# TSAHP RESEARCH GRANT PROPOSAL RATING FORM

Reviewer: \_\_\_\_\_

Title of Proposal: \_\_\_\_\_

<b>Reviewer: please response to each item.</b> A-D. Check boxes to rate proposal [1-5] on weighted criteria. E. In accord with your ratings, indicate whether this proposal merits funding; only one is funded annually. F. Provide confidential comments to support ratings. G. Provide a few constructive comments we may forward to the researcher; reviewers' identities will not be revealed.	<b>Sufficiently lacking in this criterion to deny grant support</b> <b>1</b>	↔ <b>2</b>	<b>Ade-quate</b> ↔ <b>3</b>	↔ <b>4</b>	<b>Exceptional demon-stration of this criterion</b> <b>5</b>
<b>A. (25%) Justification for the project:</b> Sound explanation of background, purpose, significance and relevance to allied health, alignment of methods to hypotheses/objectives					
<b>B. (40%) Research design/practice plan:</b> Sampling, procedures, instrumentation, suitability of analytic strategies or comprehensive implementation plan to stated purpose					
<b>C. (25%) Budget:</b> Logical and specific explanation and justification for use of funds					
<b>D. (10%) Quality of proposal:</b> Clear, organized, professional; suitable terminology, grammar, and presentation					<b>total</b>
<b>E. Recommendation for TSAHP funding</b>	<input type="checkbox"/> Outstanding proposal/project: deserves TSAHP support in full <input type="checkbox"/> Strong proposal/project: deserves consideration depending on resources <input type="checkbox"/> Promising proposal: acceptable for funding <input type="checkbox"/> Proposal is lacking: not suitable to fund as presented				

F. Please provide **confidential comments** to support your ratings and recommendation.

G. Feedback is an important aspect of peer review. Please add **comments we may provide to the author.**