

PROPOSAL REVIEW FORM

Proposal Number _____

Date _____

Proposal Title _____

Reviewer Number _____

Review Criterion	Excellent (4)	Good (3)	Fair (2)	Poor (1)
Consistency with one or more of the NLN's nursing education research priorities				
Clarity of purpose				
Adequacy of background and need for the study				
Significance to nursing education (i.e., outcomes proposed, impact anticipated, potential to improve nursing education)				
Feasibility (i.e., project can be completed in two years or less)				
Clarity of study design				
Clarity and feasibility of subject selection, recruitment, and retention (Note if the study plans to include both genders and minorities)				
Adequacy of protection of human subjects				
Clarity, adequacy, and feasibility of data collection methods				
Soundness, clarity, and consistency of methods of analysis				

Review Criterion	Excellent (4)	Good (3)	Fair (2)	Poor (1)
Innovativeness or creativity of project				
Anticipated generalizability to nursing education in the U.S.				
Clarity of writing ... Syntax free of jargon				
Cohesiveness and coherency of proposal				
Clarity and adequacy of budget				
TOTAL				

Total Score: _____

Recommendation: Approve funding in the amount of _____

Do not approve funding _____

MH: 4/13/00
Rev. TV: 9/3/02

All required elements addressed in cover letter	YES	NO
PI has qualifications/research capacity to complete the proposed project	YES	NO
Appropriate references and appendices (if needed) provided	YES	NO
All necessary letters of commitment/support included	YES	NO