

Early Career Grant Evaluation Form

ST. CLOUD STATE UNI				
Reviewer Name:	Click or tap here to enter text.			
Applicant Name:	Click or tap here to enter text.			
Project Title:	Click or tap here to enter text.			
I otal Amount Req	uested: Click or tap here to enter text.			
Did the applicant fu ☐ Yes ☐ No	er Grant: e: Click or tap here to enter text. ulfill all responsibilities associated with the award? 5 points, evaluate how well the proposal meets to	the following c	riteria	
Using a scale of 5-13	Evaluation Rubric (completed by review panel)	No Needs Attention 5	Partial Good 10	Yes Excellent 15
Project has at least 3 clearly formulated objectives.				
Project will clearly move applicant towards submission of an external grant application, or peer-reviewed dissemination.				
Project activities are measurable and manageable.				
Timeline is appropriate for work to be done.				
Budget is appropriate and budget items requested are clearly linked to associated project activities.				
Proposal is complete	e, concise and written in a persuasive manner.			
Reviewer Recom □ Fund □ Partially Fund Amount: □ Not Recommende		Total Poin	ats (90 maxi	mum):
Reviewer Comments				