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**CowinCONFIDENTIAL**

**AIFA GRANT SELECTION PANEL**

**ASSESSOR’S RATING FORM FOR EOIs**

**Applicant: Chief Investigator:** Click here to enter text.

**Other Investigators:** Click here to enter text.

**Project Title:** Click here to enter text.

Please select **one** appropriate rating of the grant application (click on tick box)

|  |  |  |
| --- | --- | --- |
|  | | |
|  | **1** | **Poor** |
|  | **2** | **Unsatisfactory** |
|  | **3** | **Marginal** |
|  | **4** | **Good** |
|  | **5** | **Very Good** |
|  | **6** | **Excellent** |
|  | **7** | **Outstanding** |

**Ratings (1-7) on the following criteria:**

Originality and Scientific Quality: Click here to enter text.

Significance of Outcomes and Potential: Click here to enter text.

Methodology, Team Quality and Capability:Click here to enter text.

**Assessor Name:** Click here to enter text.

**Date:** Click here to enter a date.

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**CONFIDENTIAL**

**GRANT APPLICATIONS 2016**

**ASSESSOR’S REPORT**

**APPLICANT Chief Investigator:** Click here to enter text.

**PROJECT TITLE:** Click here to enter text.

**Please provide comments on the following:**

1. **Scope and scientific/medical merit of the proposal, in particular its hypothesis, aims and originality.**

1. **Major strengths.**
2. **Major problems and weaknesses.**
3. **Adequacy of the research methodology.**
4. **Likelihood of achieving significant progress with the stated resources e.g. staffing, budget and equipment requests.**
5. **Is the funding requested justified for this project?**
6. **Track record of the Chief Investigator.**

**Summary. Any further comments.**