

Proposal Rating Sheet

Student Name _____

Date of Conference _____
(if applicable)

Advisor _____

Reader(s) _____

Grade (check one) P F

Rate each of the following aspects on a scale of 1-6:

(1) Truly Exceptional (2) Excellent (3) Very Good (4) Good (5) Fair (6) Poor

Originality

Justification / Literature Precedent

Experimental Design

Written Presentation

Overall Proposal Evaluation

Comments (100 words minimum):

Reader signature _____

Advisor signature _____