

Research Sector

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| **General Facility Annual Report****Referee Evaluation Form** |
| **Rating Scale :**1. Poor (1-17) 2. Average (18-20) 3. Good (21-23)4. Very Good (24-26) 5. Excellent (27-30)(***Select an appropriate number that correctly indicates your evaluation, and place this number under the appropriate box with respect to each of the items below)***. |   | 1 | 2 | 3 | 4 | 5 |
|  | Maximum Score 30\* |
| G.F. Project :      No.        | Rating Scale |
| Review Items | 1 | 2 | 3 | 4 | 5 |
| 1- To what extent has the equipment been accessible for research needs/  requirement for the period of evaluation? |       |       |       |       |       |
| **Your Comments:**      |



|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 2- Has the G.F. project budget been appropriately utilized? | 1 | 2 | 3 | 4 | 5 |
|       |       |       |       |       |
| **Your Comments:**      |
| 3- To what extent has the facility contributed to research productivity, and is  the productivity rate appropriate?  | 1 | 2 | 3 | 4 | 5 |
|       |       |       |       |       |
| **Your Comments:**      |



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| --- | --- | --- | --- | --- | --- |
| 4- Is the equipment being fully/ optimally utilized by the Dept/Faculty/  others. Your suggestions for additional function that can be  accomplished ? | 1 | 2 | 3 | 4 | 5 |
|       |       |       |       |       |
| **Your Comments:**      |
| 5- How far has the project met its stated objectives/ functions?  | 1 | 2 | 3 | 4 | 5 |
|       |       |       |       |       |
| **Your Comments:**      |



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| --- | --- | --- | --- | --- | --- |
| 6- Your views about continuing support to this G.F. project in terms of the  equipment's utility/ importance, and in terms of funds requested.  | 1 | 2 | 3 | 4 | 5 |
|       |       |       |       |       |
| **Your Comments:**      |
|  | **Total Score =**       |
| **Final Comment on Funding**  Recommend (reason/specify)       Do Not Recommend (reason/specify)       **Evaluator’s** (Signature) …………………………. Date …………………...  |

\*Use extra sheets if necessary