

DOCTORAL COMPETENCY PROJECT
REVIEWER'S REPORT FORM

Reviewer to whom submitted: _____ Date Submitted: _____

Project # ☐ 1 ☐ 2 ☐ 3 Title/Author: _____

*Please evaluate the enclosed project in terms of the criteria given below and **return within two weeks of date submitted**. Rate each criterion in accordance with the following scale:*

5 = excellent 4 = pretty good 3 = so-so 2 = not very good 1 = poor

CONTENT (not necessarily in order of importance)

- _____ Clearly describes the problem and discusses its background and validity
- _____ Cites a sufficient number of related sources and appropriately applies them
- _____ Clearly states the purpose of the study
- _____ Clearly states the procedures
- _____ Employs procedures which are appropriate to the purpose of the study
- _____ Presents and analyzes data in a way consistent with the research design
- _____ Clearly states the conclusions
- _____ Bases conclusions and interpretations on the data reported
- _____ Discusses the contributions (implications and/or applications) which the findings make to education/therapy
- _____ Overall rating of content

PUBLICATION IN PROFESSIONAL JOURNAL (indicate one)

JMT ☐ JRME ☐ Other: _____

WRITING STYLE AND ORGANIZATION

- _____ Arranges content such that ideas are effectively communicated
- _____ Adheres to a writing/documentation/reference style (APA, Turabian)
- _____ Uses accepted forms of grammar; spells and punctuates correctly
- _____ Overall rating of writing style and organization

PUBLICATION RECOMMENDATION

Consider the above rating as well as your overall impression of the manuscript. Indicate your recommendation below in accordance with the following scale:

- 5 = publish; or revise with recommended *minor* changes indicated
- 4 = revise; *some* changes required in presentation or interpretation of results
- 3 = revise; *major* changes required in presentation or methodology
- 2 = do not publish; *major* problems in presentation or methodology
- 1 = do not publish; inherent *incorrectable* methodological problems

RATING = _____

Signature _____

Date _____

Return this form to advisor: _____