



Centers of Excellence Program

Application No:

Reviewer:

GUIDELINES FOR REVIEW

A. Proposal Rating: A (Excellent), B (Very Good), C (Good), D (Poor)

1. **Overall rating for the proposed Center of Excellence:**
2. **For the subprograms, indicate your rating as follows:**

	Scientific merit	Relevance to the Overall Program
Subprogram No.	<input type="text"/>	<input type="text"/>
Subprogram No.	<input type="text"/>	<input type="text"/>
Subprogram No.	<input type="text"/>	<input type="text"/>
Subprogram No.	<input type="text"/>	<input type="text"/>
Subprogram No.	<input type="text"/>	<input type="text"/>

3. I recommend extension for ____ years (1-3)

I do not recommend an extension.

Part B – Written Evaluation

1. Evaluation of overall program:

- a. Originality, quality and impact of the research performed and of that proposed .
- b. Significance and extent of synergy between the constituent subprograms.
- c. Is the extension of the program well justified, based on the actual collaboration between the research groups involved (joint publications, etc.)?
- d. Summary (strengths / weaknesses of the proposal).



2. Evaluation of the individual sub-program(s) according to your area of expertise:

- a. Scientific merit
- b. Adequacy of methods
- c. Suitability of investigator(s)
- d. Requested budget
- e. Summary (strengths / weaknesses of the proposal).

Note: Please return this form with your written evaluation either by fax (972-2-6544-309) or e-mail (reviews@isf.org.il)