
# TEM002 Peer Review Assessment Form

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| --- | --- |
| **Project Title** |  |
| **LJMU Sponsorship Reference:** | **LJMU00** |
| **Protocol Date & Version**  |  |

# REVIEW CRITERIA:

If you answer **no** to any of the below questions, please ensure that further comments are provided.

|  |  |  |
| --- | --- | --- |
|  |  | **Please select box** |
|  | Is the research question clearly defined? |  [ ]  Yes | [ ]  No | [ ]  NA |
|  | Is the research question currently unanswered? |  [ ]  Yes | [ ]  No | [ ]  NA |
|  | Will the study make a useful contribution to the study in this area? |  [ ]  Yes | [ ]  No |  |
|  | Is there a realistic plan for dissemination and implementing findings? |  [ ]  Yes | [ ]  No |  |
|  | Is the future potential/expected benefit of the research study clearly defined |  [ ]  Yes | [ ]  No |  |
|  | Are the statistics for this study satisfactory? |  [ ]  Yes | [ ]  No | [ ]  NA |

# Reviewers assessment:

# Please select either Box 1, 2 or 3

**1.**

Reject, flawed in scientific or technical approach, repetitious of other work or otherwise judged not worth pursuing

 [ ]

**2.**

Has potential and could be further developed, but unsuitable in present form

 [ ]

**3.**

Meets all of the scientific review criteria and is judged to be scientifically sound.

 [ ]

**Further comments (especially if either Box 1 or 2 are ticked):**

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| **Name of Reviewer** |  |
| **Job role** |  |
| **Organisation** |  |
| **Signature** |  |
| **Date** |  |

**Please return the completed form to** **sponsor@ljmu.ac.uk**