## Guidelines for Evaluation

## Human Resource Development Program

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| **Request for:** [ ] **Internal Evaluation** [ ] **External Evaluation** |
| **Date of Request:** |  | **Due Date:** |  |
| **Title of Proposal:** |  |

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| --- |
| **Evaluator’s Details:** |
| Name: |  |
| Designation: |  |
| Institution: |  |
| Address: |  |
| Tel #: |  | Cell #: |  | Fax: |  |
| Email: |  | Home Page: |  |
| **What core technology is your area(s) of expertise?** *(Mark all that are applicable)* |
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|  |  |
| --- | --- |
| [ ] 3D/4D Printing | [ ] Augmented Reality / Virtual Reality |
| [ ] Big Data, Artificial Intelligence | [ ] Blockchain |
| [ ] Cloud | [ ] Neurotech |
| [ ] Robotics | [ ] Shared economy |
| [ ] The Internet of Things | [ ] Wearables, Implantables |
| [ ] Others (specify): |  |

 |
| What market(s) you are interested in? *(Mark all that are applicable)*

|  |  |
| --- | --- |
| [ ] Automotive, aviation, marine | [ ] Business, marketing, finance |
| [ ] Defence, security, safety | [ ] Education and training |
| [ ] Environment, water management | [ ] Entertainment, tourism, sport/recreation |
| [ ] Food, livestock, agribusiness | [ ] Healthcare  |
| [ ] Infrastructure, housing & transport | [ ] Mining equipment technology & services |
| [ ] Oil, gas, energy | [ ] Telecommunication |
| [ ] Textiles, clothing, footwear |  |
| [ ] Others (specify): | here |
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 |
| **To what degree are you familiar with the proposed topic/project?** *(Mark all that are applicable)* |
| [ ] I am actively engaged in research and/or developmental work in this specific area. |
| [ ] I have carried out research and/or developmental work in the past in this specific area. |
| [ ] I have taught courses in this specific area. |
| [ ] My experience is in the general area but I have not worked in this specific area. |
| Others: |  |
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| **Proposed Objectives:**  |
| **(a)** I rate the relevance of the proposed training program to national needs as: |
| **Ranking:** (check one) |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Unsatisfactory | Needs Improvement | Satisfactory | Above Average | Well Above Average |
| [ ] | [ ] | [ ] | [ ] | [ ] |

 |
| *Please justify your rating.* |
| **Key Strengths:** | <type here> |
| **Key Weaknesses:** | <type here> |
| **(b)** Keeping in view the objectives of the proposed training program, the quality of the course design is: |
| **Ranking:** (check one) |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Unsatisfactory | Needs Improvement | Satisfactory | Above Average | Well Above Average |
| [ ] | [ ] | [ ] | [ ] | [ ] |

 |
| *Please justify your rating.* |
| **Key Strengths:** | <type here> |
| **Key Weaknesses:** | <type here> |
| **(c)** The course contents / duration are: |
| **Ranking:** (check one) |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Significantly More than Required | More than Required | Sufficient | Insufficient | Significantly Insufficient |
| [ ] | [ ] | [ ] | [ ] | [ ] |

 |
| *Please justify your rating.* |
| **Key Strengths:** | <type here> |
| **Key Weaknesses:** | <type here> |
|  |

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| **Project Approach:** |
| Evaluate the methods and approach described by PD. Your specific comments on the sections’ strengths and weaknesses are significant. |
| **Key Strengths:** | <type here> |
| **Key Weaknesses:** | <type here> |
| **Ranking:** (check one) |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Unsatisfactory | Needs Improvement | Satisfactory | Above Average | Well Above Average |
| [ ] | [ ] | [ ] | [ ] | [ ] |

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| **Trainee Empowerment Plan:** |
| Does this proposal describe a self-sustaining model for improving the earning capacity, career growth, enhanced productivity for the beneficiaries? Evaluate and rank accordingly. Your specific comments on the sections’ strengths and weaknesses are significant. |
| **Key Strengths:** | <type here> |
| **Key Weaknesses:** | <type here> |
| **Ranking:** (check one) |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Unsatisfactory | Needs Improvement | Satisfactory | Above Average | Well Above Average |
| [ ] | [ ] | [ ] | [ ] | [ ] |

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| **Manpower Requirements:**  |
| **(a)** The composition of the work team, taking into consideration their number and expertise, is: |
| **Ranking:** (check one) |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Significantly More than Required | More than Required | Sufficient | Insufficient | Significantly Insufficient |
| [ ] | [ ] | [ ] | [ ] | [ ] |

 |
| *Please justify your rating. Also include your estimate on composition of the team if it differs from the applicant’s.* |
| **Key Strengths:** | <type here> |
| **Key Weaknesses:** | <type here> |
| **(b)** The quality of trainers is: |
| **Ranking:** (check one) |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Excellent | Very Good | Good | Adequate | Poor |
| [ ] | [ ] | [ ] | [ ] | [ ] |

 |
| *Please justify your rating.* |
| **Key Strengths:** | <type here> |
| **Key Weaknesses:** | <type here> |
|  |

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| **Project Governance, Management and Monitoring:** |
| Are the training outcomes concrete enough for monitoring and evaluation? Evaluate and rank accordingly. Your specific comments on the sections’ strengths and weaknesses are significant. |
| **Ranking:** (check one) |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Unsatisfactory | Needs Improvement | Satisfactory | Above Average | Well Above Average |
| [ ] | [ ] | [ ] | [ ] | [ ] |

 |
| *Please justify your rating.* |
| **Key Strengths:** | <type here> |
| **Key Weaknesses:** | <type here> |
|  |

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| **Time Requirements:**  |
| The proposed time table for executing the program including hiring, admissions, training, exams, results etc., is: |
| **Ranking:** (check one) |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| A Significant Over Estimate | An Over Estimate | A Good Estimate | An Under Estimate | A Significant Under Estimate |
| [ ] | [ ] | [ ] | [ ] | [ ] |

 |
| *Please justify your rating. Also include your estimated time if it differs from the applicant’s.* |
| **Key Strengths:** | <type here> |
| **Key Weaknesses:** | <type here> |
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| **Proposed Budget:**  |
| The budget requested in Pak. Rupees is: |
| **Ranking:** (check one) |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| A Significant Over Estimate | An Over Estimate | A Good Estimate | An Under Estimate | A Significant Under Estimate |
| [ ] | [ ] | [ ] | [ ] | [ ] |

 |
| *Please justify your rating.* |
| **Comments:** | <type here> |
|  |

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| **Capability of the Organizers:**  |
| **(a)** From what I know of the applicants, directly or through their resumes included in the proposal, I rate the **capability of the Project Director** to conduct and manage the program as: |
| **Ranking:** (check one) |

|  |  |  |
| --- | --- | --- |
| May be Challenging | Satisfactory | Very Suitable |
| [ ] | [ ] | [ ] |

 |
| *Please justify your rating.* |
| **Key Strengths:** | <type here> |
| **Key Weaknesses:** | <type here> |
| **(b)** From what I know of the applicants, directly or through their resumes included in the proposal, I rate the **capability of the Joint Project Director(s)** to conduct and manage the program as: |
| **Ranking:** (check one) |

|  |  |  |
| --- | --- | --- |
| May be Challenging | Satisfactory | Very Suitable |
| [ ] | [ ] | [ ] |

 |
| *Please justify your rating.* |
| **Key Strengths:** | <type here> |
| **Key Weaknesses:** | <type here> |
| **(c)** From what I know of the institution(s), directly or through their profile included in the proposal, I rate the **capability of the institution(s)** to conduct and manage the proposed training program as: |
| **Ranking:** (check one) |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Excellent | Very Good | Good | Adequate | Poor |
| [ ] | [ ] | [ ] | [ ] | [ ] |

 |
| *Please justify your rating.* |
| **Key Strengths:** | <type here> |
| **Key Weaknesses:** | <type here> |
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| **Overall Rating of the Proposal:** |
| In summary, I rate the proposal as: |
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|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Unsatisfactory | Needs Improvement | Satisfactory | Above Average | Well Above Average |
| [ ] | [ ] | [ ] | [ ] | [ ] |

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| **Overall Recommendations: (Internal Evaluator)** |
| [ ] Recommended for external evaluation in its current form. |
| [ ] Recommended for internal re-evaluation with the following revisions. |
| Suggested revisions: | <type here> |
| [ ] Not Recommended because of the following reasons: |
| [ ] Similar programs have already been funded many times.[ ] Objectives are too broad and vague to be achieved realistically.[ ] Methods and approach are not satisfactory.[ ] Proposal needs significant improvement to deliver the proposed value in realistic time and budget and thus may be resubmitted afresh if desired[ ] After maximum number of review(s)/re-evaluation(s), the proposal has not yet been recommended for funding by the evaluators.[ ] Others: (Please specify) |
| <type here> |

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| **Overall Recommendations: (External Evaluator)** |
| [ ] Recommended for approval in its current form. |
| [ ] Recommended for external re-evaluation with the following revisions. |
| Suggested revisions: | <type here> |
| [ ] Not Recommended because of the following reasons: |
| [ ] Similar programs have already been funded many times.[ ] Objectives are too broad and vague to be achieved realistically.[ ] Methods and approach are not satisfactory.[ ] Proposal needs significant improvement to deliver the proposed value in realistic time and budget and thus may be resubmitted afresh if desired[ ] After maximum number of review(s)/re-evaluation(s), the proposal has not yet been recommended for funding by the evaluators.[ ] Others: (Please specify) |
| <type here> |

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| --- | --- | --- | --- |
| Date: |  | Signature: |  |

**Please return this form, by e-mail and fax, before due date to:**

**Solicitation & Evaluation Department**

**Ignite National Technology Fund**

**6th Floor, HBL Tower, Jinnah Avenue Islamabad.**

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