## 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)* | | | | | | | | | | |
| |  |  |  | | --- | --- | --- | | [ ] 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 | | |  | |  | | | | | | | | | | | |
| **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: |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | 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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