1. **Overview**

The capstone addresses a topic of public health significance and is evidence that the student can integrate skills and competencies from across the curriculum to conduct public health research and/or practice. Approval of the final capstone report constitutes an assessment that the student is prepared to enter public health practice.

Students work with a faculty advisor (Capstone Chair) and committee to select foundational and concentration competencies to design a capstone experience appropriate to their educational and professional goals. Capstone planning typically begins halfway through the program of study as the capstone proposal must be approved prior to registering for CPH 529 Capstone Experience (3 credit hours).

Requirements for completion of the capstone experience include: (1) a formal written proposal, (2) a written report, and (3) an oral presentation and defense of the completed project. Students complete the written report and presentation as part of CPH 529 Capstone Experience for MPH Students in the final term of enrollment.

Examples of types of capstone projects include: systematic literature review, research report, program planning report, program evaluation report, training manual, policy statement, and legislative testimony with accompanying supporting research. Other written formats are acceptable with the approval of the student’s advisory committee and the Director of Masters Programs. Students who work full-time can conduct a project in addition to their regular employment role and responsibilities at their place of employment to satisfy capstone requirements.

The capstone is the culminating experience of the MPH degree and meets requirements of the national accrediting body in public health, the Council on Education for Public Health for an integrative learning experience.
2. **Capstone Committee**

Students are guided through the capstone experience by a three-person committee. The committee must include at least two COPH faculty members. The committee chair serves as the capstone advisor and must be a COPH faculty member from the students’ home department. Committee Chairs and faculty must hold a full or part time appointment in the COPH. Adjunct and courtesy faculty are not eligible to serve as a Committee Chair or Committee Faculty, but may serve as additional members of the committee. Students enrolled in a dual degree program must have a committee member representing the other degree program.

Student’s performance is evaluated by the committee to ensure that the experience synthesizes the selected foundational and concentration-specific competencies.
3. **Capstone Proposal**

The format for the capstone proposal is:

1. **TITLE PAGE (1 page)**
   - Project Title
   - Student Name and Concentration
   - Committee Information
     - Chair Name, Credentials
     - Member 2 Name, Credentials
     - Member 3 Name, Credentials
   - Abstract (200 words)

2. **PROJECT DESCRIPTION (Do not exceed 10 pages, double-spaced)**
   - Specific Aims or Problem Statement: State concisely and realistically what the project described in the proposal is intended to accomplish. What hypothesis is to be tested or what question is to be addressed? (1 page)
   - Significance: Briefly sketch the background (or literature review) for the capstone. Critically evaluate existing knowledge, and specifically identify the gaps which the project is intending to fill. State concisely the importance of the research described in the proposal by relating the specific aims to longer term objectives. (Do not exceed four pages)
   - Methods: Briefly discuss the design and procedures to be used to accomplish the specific aims of the proposal. Include the kinds of data to be gathered (when applicable) and the means by which the data will be analyzed and interpreted.

3. **LITERATURE CITED** - Cite the pertinent literature in the text and provide the complete reference list in the Literature Cited section. Each citation must include the names of all authors, the name of the book or journal, volume number, page numbers, and year of publication. Although no page limitation is specified for this part of the proposal, make every attempt to be judicious in compiling the biography. It should be relevant and current.

4. **APPLICATION OF PUBLIC HEALTH COMPETENCIES** – list a minimum of 1 foundational competency and 2 concentration competencies that will be the focus for the capstone. Provide an explanation as to how the capstone will integrate the selected competencies. (1 page)

5. **SUPERVISION AND FACILITIES** – If the proposed project will take place at an institution other than UNMC, list the person(s) proposed to be supervising you at the location and include contact information. Provide evidence (email from the site supervisor) that the collaborator(s) agrees to participate.

6. **HUMAN SUBJECTS** – Statement of whether project requires IRB review and approval. If IRB review is needed, attach IRB approval letter or email.
4. **IRB Requirements**

The policy #1.8 Investigational Activities Requiring IRB Review and Approval can be found at: https://www.unmc.edu/irb/_documents/HRPPoliciesProcedures.pdf. In summary, a systematic investigation conducted by a student that involves living individuals, but is performed solely to meet educational requirements of a single academic course is not considered human subject research providing the results of the investigation are presented only within the confines of the classroom or similar forum and to the students, their instructors, parents/family members, or other invited guests. However, it is recommended that the students’ supervisor and/or department exert appropriate review and oversight of the project, including, for example, completion of an IRB application without submission to the IRB. **A systematic investigation conducted by a student with intent to present the results of the investigation outside of the confines of the institution does constitute human subject research.**

**Activities Which Are Not Human Subject Research**

- **Public health surveillance activities**: including the collection and testing of information or biospecimens, conducted, supported, requested, ordered, required, or authorized by a public health authority. Such activities are limited to those necessary to allow a public health authority to identify, monitor, assess, or investigate potential public health signals, onsets of disease outbreaks, or conditions of public health importance (including trends, signals, risk factors, patterns in diseases, or increases in injuries from using consumer products).

- **Systematic investigation involving data or human biological materials (HBM) without investigator access to subject identifiers**: A systematic investigation involving data or HBM obtained from living individuals where (1) there are no identifiers which would allow any of the investigators to readily identify the individual, and (2) where the specimen or data was not collected specifically for the purposes of the research does not constitute human subject research under this policy. Required de-identification (i.e., the number of identifiers which must be removed) before the data or HBM is given to the investigator depends on whether or not the research is subject to HIPAA.

- **Quality Improvement (QI) Activities**: QI activities take place in a particular localized health care setting, their design is expected to incorporate the specific features of the setting, they are led by people who work in that setting, and they incorporate rapid feedback of results to bring about positive change for the patients in that setting. Instead of a fixed protocol implemented for a time period that may last for years, QI methods often require repeated modifications in the initial protocol as experience accumulates over time and as the desired changes engage the local structures, processes, patterns, habits, and traditions.

- **Program Assessment**: Program assessment (or program evaluation) is a systematic collection of information about the activities, characteristics and outcomes of a specific program or model, to contribute to continuous program improvement, and/or to inform decisions about future program development (https://www.cdc.gov/eval/index.htm). Program assessments do not constitute human subject research under this policy.
5. **Course Registration**

Committee approval of the capstone proposal is necessary to register for CPH 529 Capstone Experience (3 credit hours). The completed form must be submitted to the MPH Program Director to obtain permission to register for CPH 529. The form can be found in Appendix A.

6. **Written Report**

The content and format of the written report will vary according to the type of project. The main types of capstone projects include: systematic literature reviews, research reports, program planning, and program evaluation and a suggested format for each of these is provided.

Formatting Requirements for the written capstone are:

- Double-spaced, one-inch margins, 11 or 12 point font, use subheadings
- Use a reference style typical for the discipline.
- Figures must include a key and all tables/figures must be discussed in the paper text.
- Spell out acronyms when first mentioned, but use sparingly. If the paper necessarily contains a significant number of acronyms, provide a glossary.
- Be sure to use correct grammar, punctuation and spelling in all written work.

A journal article accepted for publication/published in a peer-reviewed journal, based on the capstone project, will be accepted in lieu of a final written report.
A systematic literature review provides an in-depth analysis of an important public health problem, including describing the problem, evaluating causes and determinants, and proposing evidence-based solutions regarding appropriate interventions or policy or regulatory changes for prevention and control.

Abstract

Chapter 1 – Introduction
- Research question
- Objectives
- Rationale for the review

Chapter 2 – Background
- Description of the health problem

Chapter 3 – Methods
- Search strategy
- Inclusion and exclusion criteria
- Data extraction
- Quality assessment

Chapter 4 – Results
- Search results
- Selection process
- Description of studies
- Summary of findings
- Quality assessment

Chapter 5 – Discussion
- Summary
- Public health implications
- Strengths and limitations
- Gaps in evidence
- Conclusions

Bibliography
Appendices
Biography & CV
Research Report

A research report addresses a public health related research question and involves the collection, analysis, and interpretation of data.

Abstract

Chapter 1 – Introduction
- Research question
- Specific aims
- Significance

Chapter 2 – Background and Literature Review
- Description of the health problem
- Scientific background
- Limitations and gaps in existing literature
- Rationale

Chapter 3 – Data and Methods
- Study design
- Setting and study population
- Variables (outcomes, exposures, confounders) and operational definitions
- Data sources and measurement
- Analytic plan

Chapter 4 – Results
- Study population
- Descriptive data
- Outcome data
- Main results
- Other analyses

Chapter 5 – Discussion
- Summary
- Key results
- Strengths and limitations
- Interpretation
- Generalizability

Cited Literature

Bibliography

Biography & CV
Program Planning

A program plan develops a program or policy to address a specific public health problem for a specific organization or agency and involves a needs assessment, implementation and evaluation plans, and discussion of management, fiscal, and ethical factors.

Abstract

Chapter 1 – Introduction
• Specific aims
• Significance

Chapter 2 – Background and Literature Review
• Description of the health problem
• Scientific background and rationale
• Organization/agency description

Chapter 3 – Methods
• Needs assessment
• Program description
• Logic model

Chapter 4 – Results
• Implementation plan
• Evaluation plan

Chapter 5 – Discussion
• Expected outcomes
• Strengths and limitations
• Sustainability plan
• Recommendations

Bibliography

Appendices

Biography & CV
Program Evaluation

A program evaluation involves the evaluation and/or monitoring of an existing public health program to improve public health services.

Abstract

Chapter 1 – Introduction
- Specific aims
- Significance

Chapter 2 – Background and Literature Review
- Epidemiologic description of the health problem (distribution and determinants)
- Program description
- Evaluation framework

Chapter 3 – Methods
- Evaluation methods
- Standards and criteria
- Data sources and measurement

Chapter 4 – Results
- Evaluation findings

Chapter 5 – Discussion
- Summary
- Strengths and limitations
- Recommendations
- Resource implications
- Dissemination plan

Bibliography

Appendices

Biography & CV
7. Oral Presentation

An oral presentation with PowerPoint of the capstone report is required for the successful completion of the capstone. The oral presentation is 20 minutes - 15 minutes for the presentation and an additional 5 minutes for a question and answer session. This is a public presentation therefore notification of the capstone presentation should be sent to all COPH faculty, students and staff. Following the presentation, the student will meet with their capstone committee for a final defense.

Scheduling of the capstone presentation is the responsibility of the students’ department.

The PowerPoint presentation must include the following (recommended number of slides):

1. Title slide (1 slide)
2. Outline (1 slide)
3. Foundational and concentration competencies (1 slide)
4. Background and significance of the project (1-3 slides)
5. Research/policy/evaluation question (1 slide)
6. Methods (2 slides)
7. Results or Outcomes (3 slides)
8. Summary/Discussion (2 slides)

8. Capstone Experience Final Evaluation

The capstone committee is responsible for assigning the final grade based on the quality of the written product, oral presentation, and professionalism. Upon successful completion (Pass) of the capstone experience, the capstone completion form must be filled out and signed and sent to the MPH Program Director to release the final grade. The form can be found in Appendix B.

9. Capstone Grading

Grading: A rubric is provided to assess the capstone experience. The capstone course is Pass/Fail. Based on the rubric, a result of Meets Expectations and Exceeds Expectations is a Pass and Does Not Meet Expectations is a Fail.

Incompletes: Students can register for CPH 699N Continuation of Service Learning/Capstone Experience course which is variable credit from 1-4 credits. The CPH 699N course is one-time repeatable, this means students can re-register for the course one time. If a student has registered for CPH 699N for the maximum two academic terms and has not completed their project, they will not be allowed to further re-enroll. The student will enter non-enrollment status for one academic year. If program completion has not occurred at the end of one year non-enrollment, the College of Public Health will take action to administratively withdraw the student. CPH 699N will no longer be an option after Summer 19.

Starting Fall 19, if a student receives an Incomplete, s/he will have to reregister for CPH 529 3 credits. Students can only take this course a maximum of two times The CPH 529 course is one-time repeatable, this means students can re-register for the course one time. If a student has registered for CPH 699N for the maximum two academic terms and has not completed their project, they will not be allowed to further re-enroll. The student will enter non-enrollment status for one academic year. If program completion has not occurred at the end of one year non-enrollment, the College of Public Health will take action to administratively withdraw the student.
10. **Plagiarism**

University policy on academic dishonesty is clear: academic dishonesty in any form is strictly prohibited. Anyone found to be cheating or helping someone else cheat will be referred directly to the Dean of Students for disciplinary action. Penalties are severe and may include dismissal from the University. The risks associated with cheating far outweigh the perceived benefits. Academic dishonesty includes citing someone else's work as your own - if you are unsure whether your planned action constitutes academic dishonesty, seek clarification from your instructor. All capstone reports will be checked for originality.

11. **Electronic Submission of the Capstone Written**

After receiving approval from your Capstone committee, the final approved written report must be submitted electronically (as a PDF file) to the McGoogan Library of Medicine for deposition into the UNMC electronic repository (DigitalCommons@UNMC). There will be no opportunity for editorial or other changes to the capstone after submission to the library.

The submission process consists of the following steps:

1. Read and accept the Submission Agreement (provided online at the beginning of the process)
2. Provide information about yourself and committee members
3. Upload your PDF and any associated files

Before you begin, please be sure you have the following items:
- The exact title of your capstone written report
- The abstract
- A list of keywords
- A PDF file of your work

**Embargoes & Restrictions**

**What is an embargo?** An embargo is a delayed release of information. Consult with your SL/CE Committee Chair about whether or not you require an embargo and the appropriate length of the embargo (6 months, 1 year, or 2 years). By default, no embargo will be applied. You will have an opportunity to establish a different embargo duration when uploading your capstone. Your capstone will not be available to download from the DigitalCommons@UNMC until the embargo has expired. If you choose not to embargo your work, it will be immediately available to the public.

**Why would you want to embargo your capstone report?** Some reasons to request an embargo include:
- There may be patentable rights or sensitive data in the work.
- There is an ethical need to prevent disclosure of sensitive information.
- You plan to submit portions of the work for publication in a journal.
- Your committee members plan to use some of the results as preliminary data for a grant.

**Submission Instructions**

1. Once you have completed your capstone report and are ready to electronically submit it to DigitalCommons@UNMC, go to [http://digitalcommons.unmc.edu/coph_sisce/](http://digitalcommons.unmc.edu/coph_sisce/) and click on the **Submit Your Work** link, located on the lower right hand menu bar under Author Corner.
2. You will be asked to login or create an account. Most graduates will need to **Create new account.** In order for you to receive monthly usage reports, please use your permanent email address.
3. Before proceeding, you must check the email address you provided to confirm your account.
4. Once confirmed, you will be directed to the Submission Agreement. Please read the agreement and accept the terms.
5. You will now see a form in which you must enter all of the required information – title, keywords, capstone committee members, abstract, etc.
6. At the end of the form, you must upload your final paper (Upload Full Text) as a PDF file.
7. Upon submission, the library will notify the College of Public Health, Office of Public Health Practice that the submission process has been completed.
8. The document will be available for download from DigitalCommons@UNMC after the library’s review or at the end of the embargo period (if any).
APPENDIX A
UNMC MPH Program
Permission to register for CPH 529 Capstone Experience

Project Title:

______________________________________________________________

Capstone Approval Date: ________________________________

Approved by SL/CE Committee Members:

Printed Student’s Name __________________________ Student’s Signature: __________________________

Printed Committee Chair’s Name __________________________ Committee Chair’s Signature __________________________

Printed Committee Member’s Name __________________________ Printed Committee Member’s Name __________________________

Printed Committee Member’s Name __________________________ Committee Member’s Signature __________________________

Printed Committee Member’s Name __________________________ Committee Member’s Signature __________________________

Attachments:

___ Approved Capstone Proposal

___ IRB approval or documentation stating an IRB application is not necessary for your project
APPENDIX B
UNMC MPH Program
Completion of Capstone Experience

Student:

_________________________________  ____________________________________
Printed Student’s Name  Student’s Signature:

Capstone Title:

_____________________________________________________________________

Capstone Defense Date: ________________________

Final Grade: ___ Pass       ___ Fail       ___ Incomplete

Capstone Committee Members:

_________________________________  Committee Chair’s Signature
Printed Committee Chair’s Name

_________________________________  Printed Committee Chair’s Name
Printed Committee Member’s Name

_________________________________  Committee Member’s Signature
Printed Committee Member’s Name

_________________________________  Committee Member’s Signature
Printed Committee Member’s Name

_________________________________  Committee Member’s Signature
Printed Committee Member’s Name

Date of Final Presentation: ________________________

Date of Submission to Digital Commons: ________________________
## APPENDIX C: Capstone Rubric

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Does Not Meet Expectations</th>
<th>Meets Expectations</th>
<th>Exceeds Expectations</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Background/Literature Review</strong></td>
<td>• Background/ rationale for the project are incorrect, incoherent, or flawed</td>
<td>• Background/ rationale for the project coherent and clear</td>
<td>• Background/ rationale for the project are superior</td>
</tr>
<tr>
<td></td>
<td>• Does not reflect understanding of subject matter and associated literature</td>
<td>• Reflects understanding of subject matter and associated literature</td>
<td>• Exhibits mastery of subject matter and associated literature</td>
</tr>
<tr>
<td></td>
<td>• Poor critical assessment of the literature and identification of gaps</td>
<td>• Adequate critical assessment of the literature and identification of gaps</td>
<td>• Superior critical assessment of the literature and identification of gaps</td>
</tr>
<tr>
<td></td>
<td>• Objectives are poorly supported by background literature</td>
<td>• Objectives are adequately supported by background literature</td>
<td>• Objectives are superiorly supported by background literature</td>
</tr>
<tr>
<td></td>
<td>• [if applicable] Demonstrates poor understanding of theoretical concepts</td>
<td>• [if applicable] Demonstrates understanding of theoretical concepts</td>
<td>• [if applicable] Demonstrates mastery of theoretical concepts</td>
</tr>
<tr>
<td><strong>Methods/Process/Strategies/Planning &amp; Implementation</strong></td>
<td>• Methods are partially aligned with objectives</td>
<td>• Methods are adequately aligned with objectives</td>
<td>• Methods are fully aligned with objectives</td>
</tr>
<tr>
<td></td>
<td>• Methods are poorly described (e.g., process, setting, participants, measures)</td>
<td>• Methods are adequately described (e.g., process, setting, participants, measures)</td>
<td>• Methods are superiorly described (e.g., process, setting, participants, measures)</td>
</tr>
<tr>
<td></td>
<td>• Variables, targets, measures, and implementation process is unclear and poorly developed</td>
<td>• Variables, targets, measures, and implementation process is clear and adequately developed</td>
<td>• Variables, targets, measures, and implementation process is clear, fully developed, and imaginative</td>
</tr>
<tr>
<td></td>
<td>• [if applicable] Proposed analyses are wrong, inappropriate, or missing</td>
<td>• [if applicable] Proposed analyses are routine, objective, correct</td>
<td>• [if applicable] Proposed analyses are sophisticated, robust, precise</td>
</tr>
<tr>
<td></td>
<td>• [if applicable] Conceptual framework not identified</td>
<td>• [if applicable] Conceptual framework is clear and adequately linked to project</td>
<td>• [if applicable] Conceptual framework is exceptional with superior links to project</td>
</tr>
<tr>
<td><strong>Results/Product/Outcomes</strong></td>
<td>• Results/products/outcomes are partially aligned with objectives</td>
<td>• Results/products/outcomes are adequately aligned with objectives</td>
<td>• Results/products/outcomes are fully aligned with objectives</td>
</tr>
<tr>
<td></td>
<td>• Results/products/outcomes are poorly described and do not align with description of methods</td>
<td>• Results/products/outcomes are adequately described and aligned with description of methods</td>
<td>• Results/products/outcomes are superiorly described and aligned with description of methods</td>
</tr>
<tr>
<td></td>
<td>• Tables/figures/products/outcomes are missing or do not clearly present the project findings (e.g., formatting, appropriate # of tables/figures to display the range of results)</td>
<td>• Tables/figures/products/outcomes are present and adequately present the project findings</td>
<td>• Tables/figures/products/outcomes are present and superiorly present the project findings</td>
</tr>
<tr>
<td></td>
<td>• Interpretation of data or outcomes is wrong, inappropriate</td>
<td>• Interpretation of data or outcomes is routine, objective, correct</td>
<td>• Interpretation of data or outcomes is sophisticated, robust, precise</td>
</tr>
<tr>
<td>Discussion/Conclusion/Evaluation &amp; Reflection</td>
<td>Key findings are poorly summarized with reference to objectives</td>
<td>Key findings are adequately summarized with reference to objectives</td>
<td>Key findings are fully summarized with reference to objectives</td>
</tr>
<tr>
<td>-----------------------------------------------</td>
<td>-------------------------------------------------------------</td>
<td>-------------------------------------------------------------</td>
<td>-------------------------------------------------------------</td>
</tr>
<tr>
<td>• Poor integration and interpretation of results across findings (e.g. simply repeats results or describes no results in discussion)</td>
<td>• Adequate integration and interpretation of results across findings</td>
<td>• Superior integration and interpretation of results across findings</td>
<td></td>
</tr>
<tr>
<td>• Findings poorly evaluated within the context of the literature</td>
<td>• Findings adequately evaluated within the context of the literature</td>
<td>• Findings fully evaluated within the context of the literature</td>
<td></td>
</tr>
<tr>
<td>• Does not identify or poorly describes project limitations</td>
<td>• Project limitations are adequately identified and described</td>
<td>• Project limitations are superiorly identified and described</td>
<td></td>
</tr>
<tr>
<td>• Poor discussion of impact on community setting/practice/end-users</td>
<td>• Adequate discussion of impact on community setting/practice/end-users</td>
<td>• Superior discussion of impact on community setting/practice/end-users</td>
<td></td>
</tr>
<tr>
<td>• Weak recommendations are made to community settings/practices/end-users; recommendations are poorly linked to results/products/outcomes</td>
<td>• Adequate recommendations are made to community settings/practices/end-users; recommendations are linked to results/products/outcomes</td>
<td>• Superior recommendations are made to community settings/practices/end-users; recommendations are very clearly linked to results/products/outcomes</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Significance/Scope</th>
<th>Project represents limited expansion upon previous research/work and has limited evidence of public health significance</th>
<th>Project builds upon previous research/work and shows some evidence of public health significance</th>
<th>Project greatly extends previous research/work and shows exceptional evidence of public health significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Demonstrates rudimentary critical thinking skills</td>
<td>• Demonstrates average critical thinking skills</td>
<td>• Exhibits mature, critical thinking skills</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Synthesis of competencies</th>
<th>No competencies were not identified</th>
<th>Competencies were identified</th>
<th>Competencies were identified</th>
</tr>
</thead>
<tbody>
<tr>
<td>• No discussion of how the specified competencies were synthesized</td>
<td>• Some discussion of how the specified competencies were synthesized</td>
<td>• Thoughtful and extensive discussion of how the specified competencies were synthesized</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Quality of writing and formatting</th>
<th>Writing is weak</th>
<th>Writing is adequate</th>
<th>Writing is publication quality</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Numerous grammatical and spelling errors apparent</td>
<td>• Some grammatical and spelling errors apparent</td>
<td>• No grammatical and spelling errors apparent</td>
<td></td>
</tr>
<tr>
<td>• Organization is poor</td>
<td>• Organization is logical</td>
<td>• Organization is excellent</td>
<td></td>
</tr>
<tr>
<td>• Formatting is poor</td>
<td></td>
<td>• Formatting is exceptional</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>References</th>
<th>Few references (&lt;25%) are timely and appropriate to the subject matter</th>
<th>Many references (~50%) are timely and appropriate to the subject matter</th>
<th>Most references (&gt;75%) are timely and appropriate to the subject matter</th>
</tr>
</thead>
<tbody>
<tr>
<td>• References selected below average or poor for the chosen subject (relies on websites or non-peer reviewed sources; outdated; missing key works)</td>
<td>• References selected are adequate for the chosen subject</td>
<td>• References selected are the best available for the chosen subject</td>
<td></td>
</tr>
<tr>
<td>• Statements consistently not supported by references when references are clearly needed</td>
<td>• Statements generally supported by references when references are clearly needed</td>
<td>• Statements always supported by references when references are clearly needed</td>
<td></td>
</tr>
<tr>
<td>• In-text and reference list citations are formatted incorrectly or inconsistently (e.g., switching between formatting styles, websites improperly cited, etc.)</td>
<td>• The majority of in-text and reference list citations are properly cited (e.g., switching between formatting styles, websites improperly cited, etc.)</td>
<td>• All in-text and reference list citations are properly cited (e.g., switching between formatting styles, websites improperly cited, etc.)</td>
<td></td>
</tr>
</tbody>
</table>
| Presentation Design | Presentation slides do not support the key messages.  
Font formats, color schemes and contrast are inconsistent used and/or slides are too low contrast and hard to read.  
Slides contain too many bullets (no white space) or are too busy that they detract from the presentation.  
Tables and charts are not presented or not accurate or not used effectively in the presentation. | Presentation slides support the key messages but are cluttered and unclear.  
Font formats, color schemes and contrast are inconsistent.  
Some slides contain too many bullets (no white space) or are too busy that they detract from the presentation.  
Tables and charts are presented but are not effectively used in making the point of the presentation. | Presentation slides support key messages are clear and uncluttered.  
Font formats, color schemes and contrast is consistent, simple and clean.  
Slides contain 0-5 bullets and have adequate white space so they do not detract from the presentation.  
Tables and charts are clear, accurate and summarize findings effectively and add to the point of the presentation. |
|---------------------|-------------------------------------------------|-----------------------------------------------------------------|-------------------------------------------------|
| Delivery            | Presenter reads the slides and makes no eye contact  
Presentation does not reflect a thorough preparation and coordination among students  
Presenter was hard to hear and understand the majority of the time  
Presentation does not reflect a thorough preparation  
Presentation was not within the assigned time limit | Presenter maintains eye contact and uses the notes effectively  
Presenter was easy to hear and understand the majority of the time  
Presentation partially reflects a thorough preparation  
Presentation was within the assigned time limit or over/under by a small amount of time | Presenter maintains eye contact and uses the notes effectively  
Presenter was easy to hear and understand throughout the presentation  
Presentation reflects a thorough preparation  
Presentation was within the assigned time limit |
| Professionalism     | Project timeline poorly managed by student; consistently missed deadlines; consistently required prompting by committee  
Student rarely sought feedback; feedback was clearly needed  
Minimally response to written/ verbal feedback | Project timeline mostly managed by student with some oversight from committee; some deadlines missed  
Student sought some feedback and occasionally asked for help when it was needed  
Adequately response to written/ verbal feedback | Project timeline completely managed by student; student worked independently and met all project deadlines  
Student struck an exceptional balance between working independently but asking for necessary feedback/help  
Exceptionally responsive to written/ verbal feedback |
| FINAL RATING        | □ DOES NOT MEET EXPECTATIONS □ MEETS EXPECTATIONS □ EXCEEDS EXPECTATIONS |