



**School of Social Work
PhD Program**

COMPREHENSIVE PAPER ASSESSMENT FORM

Name of Student: _____ **Student ID:** _____

Title of Comprehensive Paper:

Name of Assessors: Supervisor: _____

Program Reader: _____

In writing the assessment of the Comprehensive Paper, the assessors are asked to comment on the following criteria. Faculty are expected to render a decision within two weeks after receiving the paper. Assessment reports by two readers need to be attached to this form. This form must be submitted by the Supervisor to the PhD Coordinator. If this form is submitted via email, typing names would be sufficient for the signature section.

- Ability to demonstrate a clear understanding of the problem area supported by scientifically based rationale and relevance to social work. ;
- Ability to synthesize, analyze, and critique the theoretical knowledge informing the substantive area.
- Ability to synthesize, analyze, and critique the empirical and methodological knowledge informing the substantive area.;
- Ability to summarize the theoretical and empirical literature and identify important gaps in knowledge that need of further investigation.
- Ability to demonstrate a clear understanding of the implications and relevance of the proposed research with rational in how it will inform the literature

Indicate below one recommendation

Approval without revision ☐

Approval with minor revision ☐

Decision deferred. Revise and Resubmit ☐ (Resubmission due by: _____)

No Decision ☐

In the case the comprehensive paper supervisor and the program reader cannot agree on an outcome, the paper is forwarded to the Ph.D. Program Coordinator for review. In cases where the Ph.D. Program Coordinator is the supervisor, the paper will be forwarded to the Director of the School of Social Work for review. The Ph.D. Program Coordinator or Director of the School of Social Work will then render a final decision.

Date: _____ Program Reader Signature: _____

Indicate the Assessment of Resubmitted Paper below:

Not Approved ☐

Date: _____ Program Reader Signature: _____

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