Checklists & Forms for the
Capstone Kit

MASTER OF PUBLIC HEALTH PROGRAM

SCHOOL OF MEDICINE
CASE WESTERN RESERVE UNIVERSITY

Master of Public Health Program General Capstone Competencies Form

Student Name:_____

Capstone Title:_____

Date: _____

I am completing this form as part of my: ☐ Capstone Proposal
(To be submitted with proposal to MPH Administrative Director)
☐ Capstone Progress Report
(To be submitted with Progress Report to all members of Capstone Advisory Committee and MPH Administrative Director)
☐ Final Capstone Requirements
(To be submitted with Capstone Essay to MPH Administrative Director)

Directions: All Capstones Projects must demonstrate certain competencies ("General Capstone Competencies"). Except where indicated below, General Capstone Competencies must be addressed at either at the "Sufficient" or the "Advanced" level. In addition, Capstone Projects should address, at least in part, Major-Specific Competencies (included on a separate form). You may choose to include additional competencies, but you must address the General Capstone Competencies and Major-Specific Competencies. Please complete both the General Capstone Competency and the Major-Specific Competency Forms and submit according to the guidelines above. You can update which competencies you are addressing (and the level at which you are addressing them) with each submission. You and your Capstone Advisory Committee will also be asked to evaluate your success in addressing your chosen competencies with each progress report and at the completion of your Capstone Experience.

Purpose Statement for Capstone Project (one sentence):

_____

General Capstone Competencies

My Capstone addresses the following competencies:

Understand the role of epidemiology in the control of health problems, including an understanding of the language of epidemiology and ability to calculate basic epidemiologic measures, an ability to comprehend basic ethical and legal principles pertaining to the collection, maintenance, use and dissemination of epidemiologic data, and an ability to evaluate and communicate the strengths and limitations of epidemiologic reports.

Level: ☐ Sufficient ☐ Advanced

Understand the behavioral, social, and cultural factors related to individual and population health, including an ability to identify basic theories, concepts, and models from a range of social and behavioral disciplines that are used in public health research and practice, describe the role of social and community factors in both the onset and solution of public health problems, and apply evidence-based approaches to the development and evaluation of social and behavioral science interventions.

Level: ☐ Sufficient ☐ Advanced

Demonstrate effective written and oral skills for communicating with different audiences in the context of professional public health activities. (Level: Advanced)

Level: ☐ Advanced

Engage in dialogue and learning from others to advance public health goals.

Level: ☐ Advanced

In collaboration with others, prioritize individual, organizational, and community concerns and resources for public health programs.

Level: ☐ Sufficient ☐ Advanced

Analyze the effects of political, social, and economic policies on public health systems at the local, state, national, and international levels.

Level: ☐ Sufficient ☐ Advanced

To Be Completed By MPH Program

Received By: _____

Date Received: _____

Student Name: _____

Date: _____

Major-Specific Capstone Competency Form:

POPULATION HEALTH RESEARCH

Please complete this form if you are enrolled in the Population Health Research major. Population Health Research Capstone Projects *should* address at least some of these competencies. Check any competency you will be addressing and indicate the level you seek to attain. Attach and submit with the General Capstone Competency Form.

I am completing this form as part of my:
- ☐ Capstone Proposal
  (To be submitted with proposal to MPH Administrative Director)
- ☐ Capstone Progress Report
  (To be submitted with Progress Report to all members of Capstone Advisory Committee and MPH Administrative Director)
- ☐ Final Capstone Requirements
  (To be submitted with Capstone Essay to MPH Administrative Director)

My Capstone Project addresses the following major-specific competencies:

☐ Interpret results of statistical analyses found in public health studies.

Level: ☐ Sufficient ☐ Advanced

☐ Apply descriptive and inferential methodologies according to the type of study design for answering a particular research question.

Level: ☐ Sufficient ☐ Advanced

☐ Develop cohesive, focused research aims with specific, testable hypotheses to address specific public health questions affecting populations and communities.

Level: ☐ Sufficient ☐ Advanced

☐ Design, analyze and present data in the way(s) best suited for an appropriately identified target audience.

Level: ☐ Sufficient ☐ Advanced

☐ Develop written and oral presentations based on statistical analyses for both public health professionals and educated lay audiences.

Level: ☐ Sufficient ☐ Advanced

Attach any custom (optional) additional competencies addressed by your Capstone Experience.

To Be Completed By MPH Program

Received By: _____

Date Received: _____

Student Name: _____

Date: _____

Major-Specific Capstone Competency Form:

GLOBAL HEALTH

Please complete this form if you are enrolled in the Global Health major. Global Health Capstone Projects *should* address at least some of these competencies. Check any competency you will be addressing and indicate the level you seek to attain. Attach and submit with the General Capstone Competency Form.

I am completing this form as part of my:
- ☐ Capstone Proposal
  (To be submitted with proposal to MPH Administrative Director)
- ☐ Capstone Progress Report
  (To be submitted with Progress Report to all members of Capstone Advisory Committee and MPH Administrative Director)
- ☐ Final Capstone Requirements
  (To be submitted with Capstone Essay to MPH Administrative Director)

My Capstone Project addresses the following major-specific competencies:

☐ Identify methods for strengthening and focusing existing capacities and resources for health program sustainability.

Level: ☐ Sufficient ☐ Advanced

☐ Ensure collaborations represent the social, economic, and cultural diversity of the community.

Level: ☐ Sufficient ☐ Advanced

☐ Apply the fundamental principles of international standards for the protection of human research subjects in diverse cultural settings.

Level: ☐ Sufficient ☐ Advanced

☐ Employ social justice frameworks to highlight the root causes of health inequities.

Level: ☐ Sufficient ☐ Advanced

☐ Develop methods for disseminating messages about a project's progress and impact.

Level: ☐ Sufficient ☐ Advanced

☐ Integrate multi-dimensional factors into the planning, implementation, and evaluation of health interventions. (Multi-dimensional factors include: social, demographic, cultural, and political.)

Level: ☐ Sufficient ☐ Advanced

☐ Present evaluation findings and lessons learned to program beneficiaries and stakeholders.

Level: ☐ Sufficient ☐ Advanced

Attach any custom (optional) additional competencies addressed by your Capstone Experience.

To Be Completed By MPH Program

Received By: _____

Date Received: _____

Student Name: _____

Date: _____

Major-Specific Capstone Competency Form:

HEALTH CARE POLICY & ADMINISTRATION

Please complete this form if you are enrolled in the Health Care Policy & Administration major. Health Care Policy & Administration Capstone Projects *should* address at least some of these competencies. Check any competency you will be addressing and indicate the level you seek to attain. Attach and submit with the General Capstone Competency Form.

I am completing this form as part of my: ☐ Capstone Proposal
(To be submitted with proposal to MPH Administrative Director)
☐ Capstone Progress Report
(To be submitted with Progress Report to all members of Capstone Advisory Committee and MPH Administrative Director)
☐ Final Capstone Requirements
(To be submitted with Capstone Essay to MPH Administrative Director)

My Capstone Project addresses the following major-specific competencies:

☐ Describe the legal and ethical bases for public health and health services.

Level: ☐ Sufficient ☐ Advanced

☐ Discuss the policy process for improving the health status of populations.

Level: ☐ Sufficient ☐ Advanced

☐ Apply the principles of program planning, development, budgeting, management and evaluation in organizational and community initiatives.

Level: ☐ Sufficient ☐ Advanced

☐ Describe the attributes of leadership in public health.

Level: ☐ Sufficient ☐ Advanced

☐ Demonstrate team building, negotiation, and conflict management skills.

Level: ☐ Sufficient ☐ Advanced

☐ Analyze the potential impacts of legal and regulatory environments on the conduct of ethical public health research and practice.

Level: ☐ Sufficient ☐ Advanced

☐ Analyze the effects of political, social and economic policies on public health systems at the local, state, national and international levels.

Level: ☐ Sufficient ☐ Advanced

Attach any custom (optional) additional competencies addressed by your Capstone Experience.

To Be Completed By MPH Program

Received By: _____

Date Received: _____

Student Name: _____

Date: _____

Major-Specific Capstone Competency Form:

HEALTH PROMOTION & DISEASE PREVENTION

Please complete this form if you are enrolled in the Health Promotion & Disease Prevention major. Health Promotion & Disease Prevention Capstone Projects *should* address at least some of these competencies. Check any competency you will be addressing and indicate the level you seek to attain. Attach and submit with the General Capstone Competency Form.

I am completing this form as part of my: ☐ Capstone Proposal
(To be submitted with proposal to MPH Administrative Director)
☐ Capstone Progress Report
(To be submitted with Progress Report to all members of Capstone Advisory Committee and MPH Administrative Director)
☐ Final Capstone Requirements
(To be submitted with Capstone Essay to MPH Administrative Director)

My Capstone Project addresses the following major-specific competencies

☐ Identify and engage critical stakeholders for the development, implementation, and evaluation of public health strategies (i.e. programs, policies, and interventions) that address multiple targets and multiple levels of intervention.

Level: ☐ Sufficient ☐ Advanced

☐ Describe how social, behavioral, environmental and biological factors contribute to specific individual and community health outcomes.

Level: ☐ Sufficient ☐ Advanced

☐ Explain how systems (e.g. individuals, social networks, organizations, and communities) may be viewed as systems within systems in the analysis of public health problems and solutions.

Level: ☐ Sufficient ☐ Advanced

Attach any custom (optional) additional competencies addressed by your Capstone Experience.

To Be Completed By MPH Program

Received By: _____

Date Received: _____

Student Name: _____
Date: _____

Capstone Competency Student Self-Assessment

(To be Completed With Progress Report(s) and Final Capstone Essay)

I am completing this form as part of my: ☐ Capstone Progress Report
(To be submitted with Progress Report to all members of Capstone Advisory Committee and MPH Administrative Director)
☐ Final Capstone Requirements
(To be submitted with Capstone Essay to MPH Administrative Director)

Please assess your success in achieving the competencies that you planned to address as part of your Capstone Experience. Please feel free to update the competencies you will be addressing at any point in the project.

My progress has been _____ on the following competencies (please attach any necessary explanations):

Understand the role of epidemiology in the control of health problems, including an understanding of the language of epidemiology and ability to calculate basic epidemiologic measures, an ability to comprehend basic ethical and legal principles pertaining to the collection, maintenance, use and dissemination of epidemiologic data, and an ability to evaluate and communicate the strengths and limitations of epidemiologic reports.

☐ Insufficient (Explain) ☐ Approaching Sufficiency ☐ Sufficient ☐ Advanced

Understand the behavioral, social, and cultural factors related to individual and population health, including an ability to identify basic theories, concepts, and models from a range of social and behavioral disciplines that are used in public health research and practice, describe the role of social and community factors in both the onset and solution of public health problems, and apply evidence-based approaches to the development and evaluation of social and behavioral science interventions.

☐ Insufficient (Explain) ☐ Approaching Sufficiency ☐ Sufficient ☐ Advanced

Demonstrate effective written and oral skills for communicating with different audiences in the context of professional public health activities.

☐ Insufficient (Explain) ☐ Approaching Sufficiency ☐ Sufficient ☐ Advanced

Engage in dialogue and learning from others to advance public health goals.

☐ Insufficient (Explain) ☐ Approaching Sufficiency ☐ Sufficient ☐ Advanced

In collaboration with others, prioritize individual, organizational, and community concerns and resources for public health programs.

☐ Insufficient (Explain) ☐ Approaching Sufficiency ☐ Sufficient ☐ Advanced

Analyze the effects of political, social, and economic policies on public health systems at the local, state, national, and international levels.

☐ Insufficient (Explain) ☐ Approaching Sufficiency ☐ Sufficient ☐ Advanced

Major Specific Competencies (As indicated on Major-Specific Capstone Competency Form)

☐ Insufficient (Explain) ☐ Approaching Sufficiency ☐ Sufficient ☐ Advanced

Custom (Optional) Competencies (As specified by student)

☐ Insufficient (Explain) ☐ Approaching Sufficiency ☐ Sufficient ☐ Advanced

Student Signature: _____

To Be Completed By MPH Program

Received By: _____

Date Received: _____

Student Name: _____
Date: _____

Capstone Competency Assessment

(To be completed by Capstone Advisory Committee Members with Final Capstone Essay. Please submit to MPH Administrative Director.)

Evaluator's Name: _____
Evaluator's Role: ☐Capstone Committee Chair ☐Capstone Committee Member ☐Faculty Advisor ☐Other

Please indicate the success that the student has achieved in addressing the competencies indicated below. General Competencies are to be addressed by all Capstone Projects. Major-specific and any custom competencies are chosen by the individual student. Complete this form and return to the student. It is the student's responsibility to turn this form in to the MPH Administrative Director. This form must be received before any grade can be issued.

Student's progress has been _____ on the following competencies (please attach any necessary explanations):

General Competencies

Understand the role of epidemiology in the control of health problems, including an understanding of the language of epidemiology and ability to calculate basic epidemiologic measures, an ability to comprehend basic ethical and legal principles pertaining to the collection, maintenance, use and dissemination of epidemiologic data, and an ability to evaluate and communicate the strengths and limitations of epidemiologic reports.

☐Insufficient (Explain) ☐Approaching Sufficiency ☐Sufficient ☐Advanced

Understand the behavioral, social, and cultural factors related to individual and population health, including an ability to identify basic theories, concepts, and models from a range of social and behavioral disciplines that are used in public health research and practice, describe the role of social and community factors in both the onset and solution of public health problems, and apply evidence-based approaches to the development and evaluation of social and behavioral science interventions.

☐Insufficient (Explain) ☐Approaching Sufficiency ☐Sufficient ☐Advanced

Demonstrate effective written and oral skills for communicating with different audiences in the context of professional public health activities.

☐Insufficient (Explain) ☐Approaching Sufficiency ☐Sufficient ☐Advanced

Engage in dialogue and learning from others to advance public health goals.

☐Insufficient (Explain) ☐Approaching Sufficiency ☐Sufficient ☐Advanced

In collaboration with others, prioritize individual, organizational, and community concerns and resources for public health programs.

☐Insufficient (Explain) ☐Approaching Sufficiency ☐Sufficient ☐Advanced

Analyze the effects of political, social, and economic policies on public health systems at the local, state, national, and international levels.

☐Insufficient (Explain) ☐Approaching Sufficiency ☐Sufficient ☐Advanced

Major Specific Competencies (As specified by student as part of proposal and/or Capstone Progress Report)

☐Insufficient (Explain) ☐Approaching Sufficiency ☐Sufficient ☐Advanced

Custom (Optional) Competencies (As specified by student as part of proposal and/or Capstone Progress Report)

☐Insufficient (Explain) ☐Approaching Sufficiency ☐Sufficient ☐Advanced

Evaluator's Signature: _____

To Be Completed By MPH Program

Received By: _____

Date Received: _____

Capstone Process Checklist

☐ **Build a Project:** Student-initiated and student-driven

Timeline: At least one semester before proposed start date.

Network: brainstorm ideas; discover community needs/interest with seminar speakers, MPH staff, faculty members, other students. The MPH Capstone Seminar (MPHP 506 and 507) series is designed to help connect you to members of the Public Health Practice community. These are the people on the front lines with the experience, knowledge and resources you need to get the most out of your project.

Develop Ideas: Think about your experience, goals, area of concentration, population focus, preferred methodological approach, target population(s). Keep in mind that anything you want to be able to do with skill after graduation should be imbedded into your Capstone Experience.

Find a Site: Where will you do the project? What community might it benefit? What organization and on-site preceptor?

For some students, the organization or site will be the first thing they are sure of. Other students will have an idea in mind and seek a site at which the idea can be actualized. Still others will know the population they wish to work with first, and identify a site and a topic.

☐ **Build a Capstone Advisory Committee**

Timeline: Identify Capstone Advisory Committee Chair at least one semester before proposed start date. Identify all other Capstone Advisory Committee Members six weeks before submitted Capstone Proposal.

Identify and invite a minimum of three people who can guide, support and advise you. One member should act as the Chair of the Committee Advisory Committee. The Chair should hold a faculty appointment in the Department of Epidemiology & Biostatistics and will have the academic authority to assign the final grade in collaboration with the other Capstone Advisory Committee members.

In addition to the Chair, we recommended including a Capstone Site Preceptor as a member of your Capstone Advisory Committee. The Capstone Site Preceptor is a member of the organization in which you will be completing your Capstone Experience and is responsible for day-to-day supervision. The Capstone Site Preceptor serves as a troubleshooter for issues related to the site and the population participating in the project. You'll also want Capstone Advisory Committee Members who can address specific learning pieces, methodology, and content, in addition to serving as troubleshooters for program related issues. Capstone Advisory Committee Members should have some relevant content expertise to provide guidance on content and project methodology. Committee members can be on the faculty or from the Public Health Practice Community, as long as they possess knowledge of and sincere interest in your topic – and can be resources for procedural, logistical, or scholarly issues with you.

You will be responsible for how your committee works. Students are expected to maintain regular contact with the committee through whatever means serve the committee best. Students are also required to provide written progress reports to all committee members (copy to the MPH Office) if the project spans more than one term. Students also provide committee members with essay evaluation forms accompanying the final essay submission and presentation evaluation forms (also included in this kit and available for download online) just prior to the final presentation.

☐ **Develop and write project proposal and get approval!**

Timeline: Submit draft of your proposal to your Capstone Advisory Committee at least one month prior to the semester you intend to begin your Capstone Experience. Make revisions if requested. Submit the final version of your proposal at least two weeks prior to the start of the semester in which you intend to start your Capstone Experience.

If you are completing a project which requires IRB approval, we recommend starting even earlier. For domestic projects, we recommend allotting two months for IRB approval. For international projects, we recommend giving yourself at least one semester to complete the IRB process. **Consult your Capstone Advisory Committee for guidance with the IRB process.** Additional details on the IRB process are also available in this handbook.

- ☐ **Write Proposal** (refer to proposal cover sheet/checklist), including:
  Every proposal **must** include a cover sheet.
  Purpose of Project—what you intend to achieve
  Project Goals – what YOU want to get out of the project and what you hope to contribute as a result of the project
  Project Timeline – how you intend to spend your time (including how many semesters you intend to spend on your Capstone Experience).
  Project Logistics—describe the procedure you will use to meet your goals
  Project Outcome—tangible products of the project
- ☐ **Submit final approved proposal to MPH Office** for a course permit to be issued to register for Capstone credits.

☐ **Register for Capstone Credits (MPHP 652).**

Timeline: By the end of the Add/Drop period during the semester in which you plan to register.
The Capstone Project Proposal must be approved by the MPH office prior to receiving a permit to register for MPHP 652 "Public Health Capstone."

☐ **Carry out the plan**

Timeline: As determined in your Capstone Project Proposal.

- ☐ Carry out the project as outlined in the proposal – consult with Capstone Advisory Committee members if changes need to be made to the project as described in the approved proposal.
- ☐ Meet regularly (as determined in advance) with Advisory Committee members to keep them informed of progress
- ☐ Make adjustments as needed
- ☐ Confirm and /or determine outcomes

☐ **Write essay** (refer to Essay Guidelines)

Timeline: Submit final essay to all Capstone Advisory Committee Members (copy to MPH Office) with accompanying essay evaluation forms at least 2 weeks prior to presentation at *Innovations in Population Health* Conference. The reason the essay must be turned in before the end of the semester is to allow your Capstone advisory committee to make suggestions and comments in plenty of time to allow changes before your presentation and the final essay is turned in. Committee members should provide feedback to MPH Office on essay evaluation forms for grading purposes. Also, students who are planning to graduate must be certified to graduate 5 weeks before commencement. MPH students cannot be certified to graduate with a completed Capstone Essay on file.

- ☐ Encourage Advisory Committee to evaluate project promptly and provide feedback to MPH Office. It is <u>your</u> responsibility to ensure that the MPH Office receives their feedback on your essay.

☐ **Present project at *Innovations in Population Health* Conference** (refer to Presentation Guidelines).

- ☐ Invite Capstone Advisory Committee Members, site colleagues and faculty members – Committee members should attend and provide feedback to MPH Office on presentation evaluation forms for grading purposes.
- ☐ File copy of presentation with MPH Office and all Capstone Advisory Committee Members at least 24 hours before presentation.
- ☐ Encourage Capstone Advisory Committee to evaluate project promptly and provide feedback to the MPH Office. It is <u>your</u> responsibility to ensure that the MPH Office receives their feedback on your presentation.

☐ Celebrate! Celebrate! Celebrate!

Master of Public Health Program Capstone Proposal Cover Sheet & Approval Form

Student Information:

Student's Name: _____ Student Identification #: _____

Student's Email Address: _____ Student Phone Number: _____

Student's Major(s): ☐ Population Health Research ☐ Health Care Policy & Administration ☐ Global Health ☐ Health Promotion & Disease Prevention

Registration Plans:
- ☐ One Semester: 9 Capstone credit hours
- ☐ Two Semesters: 3 Capstone credit hours in first semester; 6 Capstone credit hours in second semester
- ☐ Two Semesters: 6 Capstone credit hours in first semester; 3 Capstone credit hours in second semester
- ☐ Three Semesters: 3 Capstone credit hours in each semester
- ☐ Other (specify): _____

Proposed Timeline: Starting Semester/Year: _____ Ending Semester/Year: _____

Capstone Information:

Capstone Title: _____

Does Capstone Have a Research Component? ☐ Yes ☐ No

If yes, have you received CREC certification? ☐ Yes (Completion Date: _____) ☐ No

Have you submitted proposal to IRB?
- ☐ Not required
- ☐ Will submit proposal before beginning research
- ☐ Yes; IRB Protocol #_____ (Please attach all IRB documentation)

Capstone Site Information:

Organization: _____

Preceptor's Name: _____ Preceptor's Title: _____

Preceptor's Phone Number: _____ Preceptor's Email: _____

Capstone Advisory Committee Information & Signatures:

Chair's Name: _____ Chair's Title: _____

Chair's Department/Organization: _____

Chair's Phone Number: _____ Chair's Email Address: _____

Chair's Signature: _____

Advisor #2's Name: _____ Advisor's Title: _____

Advisor's Department/Organization: _____

Advisor's Phone Number: _____ Advisor's Email Address: _____

Advisor's Signature: _____

Advisor #3's Name: _____ Advisor's Title: _____

Advisor's Department/Organization: _____

Advisor's Phone Number: _____ Advisor's Email Address: _____

Advisor's Signature: _____

Advisor # 4's Name: _____ Advisor's Title: _____

Advisor's Department/Organization: _____

Advisor's Phone Number: _____ Advisor's Email Address: _____

Advisor's Signature: _____

To Be Completed by MPH Program:

Date Received: _____

Received By: _____

Action:
- ☐ **Approved**
- ☐ **Request Revisions**
- ☐ **Rejected**

Capstone Proposal Guidelines

It is expected that the Capstone Proposal will include:

☐ Cover Sheet including name, title of the project, name of sponsoring organization, capstone advisory committee members, and project's time frame.

☐ Brief Project Description

☐ Background

A. Literature Review
B. Rationale
    1. Concise statement of the research questions you are trying to address
    2. How you will attempt to address the research questions

☐ Project Design will include:

A. A narrative of the project procedure in the sequence in which the project segments will be performed
B. A description of each method or approach to be utilized
C. A depiction the population participating in the project
D. A description of the project site
E. An inventory of relevant institutional resources available to help complete your project
F. A time line

☐ Materials and Methods

A. An explanation of the instruments and materials you intend to utilize

    We encourage research oriented capstone projects, but before data collection can occur, the methodology must be approved by at least two advisors on the committee. Samples of survey(s) should be included with the proposal. Research projects will likely require IRB clearance. Please consult with your Capstone Advisory Committee for guidance on the IRB Process. Please attach a copy of any IRB application and/or IRB determination letter with your proposal.

B. Draft informed consent form

☐ Data Analysis or Evaluation, and Interpretation

A. Intended analytic technique, or
B. Evaluation plan

☐ Anticipated outcomes

A. What knowledge or product can be expected as a result of your project
B. What is the potential significance of the results, including public health relevance

☐ References

Capstone Essay Evaluation Form

Evaluation process:

- Student is responsible for distributing evaluation sheet along with essay to advisory committee members two weeks prior to presentation date.
- Advisory committee members are responsible for collaborating with each other about the quality of the student's product, recommending revisions (if needed) to the student in a timely manner prior to the presentation date, completing and submitting essay evaluation forms to MPH Office.
- Committee Chair is responsible for communicating student's final grade to MPH Office.
- MPH Office is responsible for submitting final grade to University Registrar and providing evaluation sheets to student.

Student's Name: _____ Date:_____

Evaluator's Name:_____

Evaluator's Role: ☐Capstone Committee Chair ☐Capstone Committee Member ☐Faculty Advisor ☐Other

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Summary Statement: A brief overview of the purpose of the project and what the project addresses.

☐Inadequate ☐Adequate ☐Well Done ☐Outstanding

Comments (Use reverse side or additional pages if you need more room):

_____

Objectives: A numbered list of the objectives and /or research questions addressed by the project.

☐Inadequate ☐Adequate ☐Well Done ☐Outstanding

Comments (Use reverse side or additional pages if you need more room):

_____

Background: A detailed literature review describing previous work done on the topic that led to the project undertaken. Effort should be made to place the project in theoretical model. The student should address related controversies.

☐Inadequate ☐Adequate ☐Well Done ☐Outstanding

Comments (Use reverse side or additional pages if you need more room):

_____

Competencies: A brief discussion of competencies addressed. Student should also turn in Competency Reporting Form with essay.

☐Inadequate ☐Adequate ☐Well Done ☐Outstanding

Comments (Use reverse side or additional pages if you need more room):

_____

Methods: Design, setting, participants, intervention (if appropriate), main outcome measures.

☐Inadequate ☐Adequate ☐Well Done ☐Outstanding

Comments (Use reverse side or additional pages if you need more room):

_____

Results: The product of the effort put forth in the Capstone project should be articulated in detail in this section.

☐Inadequate ☐Adequate ☐Well Done ☐Outstanding

Comments (Use reverse side or additional pages if you need more room):

_____

Discussion: Detailed discussion of the results. Student should place the results in the context of the existing base of knowledge on the topic. Limitations of the project should be discussed.

☐Inadequate ☐Adequate ☐Well Done ☐Outstanding

Comments (Use reverse side or additional pages if you need more room):

_____

Conclusion: Discrete conclusions supported by evidence should be communicated. Further study or effort implied by the conclusions should be expressed. Equal attention should be given to positive and negative conclusions.

☐Inadequate ☐Adequate ☐Well Done ☐Outstanding

Comments (Use reverse side or additional pages if you need more room):

_____

ESSAY IS OF PUBLISHABLE QUALITY (Refer to Capstone Kit "Definition of Publishable Quality"): ☐YES ☐NO

STUDENT HAS SUCCESSFULLY COMPLETED ESSAY REQUIREMENTS: ☐YES ☐NO

If "NO", please elaborate on the reverse side (or on additional pages, as necessary) and notify MPH Program Director and MPH Administrative Director

Evaluator's Signature: _____

Capstone Presentation Evaluation Form

Evaluation process:

- Student is responsible for distributing a copy of the Capstone Essay to Capstone Advisory Committee Members **two weeks prior to presentation** so that they may adequately assess the presentation.
- Student is responsible for distributing evaluation sheet along with any handouts to Capstone Advisory Committee Members prior to presentation.
- Committee members are responsible for collaborating with each other about the quality of the student's presentation, completing and submitting presentation evaluation forms to the student – who will then turn form into MPH Office.
- Committee Chair is responsible for communicating student's final grade to MPH Office.
- MPH Office is responsible for submitting final grade to University Registrar and providing evaluation sheets to student.

Student's Name: _____ Date:_____

Evaluator's Name:_____

Evaluator's Role: ☐Capstone Committee Chair ☐Capstone Committee Member ☐Faculty Advisor ☐Other

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Introduction: Were goals, objectives, and methods of project stated clearly? Could audience grasp the full scope of the project?

☐Inadequate ☐Adequate ☐Well Done ☐Outstanding

Comments (Use reverse side or additional pages if you need more room):

_____

Knowledge of Material: Is presenter fluent with material and topic-area?

☐Inadequate ☐Adequate ☐Well Done ☐Outstanding

Comments (Use reverse side or additional pages if you need more room):

_____

Visual Support: Did visual aids (e.g., PowerPoint slides) appropriately support the oral presentation (not duplicate it)?

☐Inadequate ☐Adequate ☐Well Done ☐Outstanding

Comments (Use reverse side or additional pages if you need more room):

_____

Results: Was the product of the effort put forth in the Capstone Project articulated, including a detailed discussion of the results in the context of the existing base of knowledge on the topic? Were limitations of the project discussed?

☐Inadequate ☐Adequate ☐Well Done ☐Outstanding

Comments (Use reverse side or additional pages if you need more room):

_____

Delivery: Was presenter audible and comprehensible?

☐Inadequate ☐Adequate ☐Well Done ☐Outstanding

Comments (Use reverse side or additional pages if you need more room):

_____

Responsiveness: Did presenter respond effectively to questions posed (if any), indicating a firm grasp of the material?

☐Inadequate ☐Adequate ☐Well Done ☐Outstanding

Comments (Use reverse side or additional pages if you need more room):

_____

STUDENT HAS SUCCESSFULLY COMPLETED PRESENTATION REQUIREMENTS: ☐YES ☐NO

If "NO", please elaborate on the reverse side (or on additional pages, as necessary).

Evaluator's Signature: _____

Special Considerations for International Capstone Experiences

☐ Speak with Capstone Advisory Committee about safety and logistical considerations for the host country.

☐ Approved IRB Protocol (from Case Western Reserve University)

☐ Approved IRB Protocol (from Host Country)

☐ Human Subjects Regulations Certification (through CWRU/CITI program)

☐ Signed Statement of Responsibility (through CWRU)

Travel Documentation

☐ Valid Passport

Make sure your passport does not expire less than 6 months before your return flight.

☐ Visa

Check with Foreign Embassy to determine the specific type of visa that will be required for you to perform research. Many countries require special research visas which require more planning on your part due to lengthier application timeframes, additional expenses, and documentation (e.g., letters of support from the foreign research institution, chest x-rays, proof of vaccinations, police reports, etc. Note that performing research after entering the country as a tourist (i.e., without an approved research visa) may be illegal in some countries.

☐ Required Health Inoculations/Medications (Traveler's Clinic)

Visit a traveler's clinic at least 3 months prior to your departure since some vaccinations require booster doses.

☐ Emergency Evacuation Insurance

A variety of companies can insure travelers to provide emergency medical transportation from remote or underdeveloped areas to regions with improved health facilities and care. In some cases, this type of insurance may be available through CWRU during approved CWRU international activities, but supplemental insurance may still be advisable. In all cases, verify your eligibility and restrictions (e.g., for specific *activities* that you could foresee during your travels) and carry copies of the coverage.

☐ Registration with US Embassy

In the unexpected event of political upheaval, natural disaster, or other emergency, the US embassy may be able to provide assistance to US citizens. Registration is easy and free through their website.

☐ Import Permit

If bringing back biological samples, be sure you have a valid import permit issued by CDC. Note: You may not bring back biological samples in your baggage. Be aware that these items may be confiscated and not returned. Also, host country may require their approval to remove biological samples from the country.

RE: Statement of Responsibility

January 25, 2008

This document is a statement of responsibility that the Provost's office (Lynn Singer, Ph.D.) has prepared and wishes to be distributed for all student programs that operate abroad. Students engaged in all formal programs operated outside of the US must read and sign this document, and the program must retain copies of the signed documents. In addition, faculty going abroad should familiarize themselves with the contents and understand their rights and responsibilities when they travel abroad on Case student programs.

Execution of this document is now a formal requirement for all international programs.

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STATEMENT OF RESPONSIBILITY

I, _____, have been accepted to participate in

_____.

I accept my admission to the program and promise to abide by the following Statement of Responsibility:

1. University Policies and Responsible Behavior: I recognize that while abroad, I am expected to comply with Case Western Reserve's policies and procedures including but not limited to its academic integrity policies. I understand that any violation of Case Western Reserve's policies shall be subject to discipline through the appropriate internal University process and/or subject to Academic Integrity Board action. I understand that while abroad, I represent Case Western Reserve and am expected to conduct myself in a professional and responsible manner.

2. Host Country Laws: I have reviewed and understand, and agree to abide by the laws of my host country, community, institution, and program, including its academic integrity policies. I understand I need to be sensitive to the social mores of the host country. I also understand I am subject to the disciplinary laws, codes, and processes of that host country, community, institution, and program. I understand that any violation of those laws, codes and/or processes may lead to discipline by the host institution and/or judicial action by the host country. I also understand that those violations may lead to discipline by Case Western Reserve and/or Academic Integrity Board action. I recognize that those laws, codes, and processes may not provide for the same types of due process, protections and rights afforded in the United States. I also recognize that the public safety personnel in foreign countries may not provide a level of personal security comparable to that of the United States. I understand that Case Western Reserve is not responsible for representing me before any courts or tribunals in the host country but instead I will be responsible for my own legal representation to the extent such becomes necessary.

3. Complaint Procedure: I understand that I may utilize the applicable Complaint procedures set forth in the Handbook(s) for the School in which I am enrolled and/or the School sponsoring this program. I understand that I may make this Complaint with several different individuals/offices at Case Western Reserve depending upon whom is most readily available. In addition to any faculty members and/or staff involved with the study abroad program, this also includes individuals in the Office of Student Affairs, Office of Counsel, Dean's Office of the School in which I am enrolled, and/or the Dean's Office of the School sponsoring the program. I understand that while I may make such a complaint, Case Western Reserve does not assume responsibility for the actions of third-parties which occur in the host country and that Case Western Reserve may have no ability to control or prevent such actions.

4. Health: I understand I will be responsible for my own health maintenance. In the event of a serious illness, accident or emergency, I will inform an appropriate program official so that assistance may be secured and so that my designated emergency contact may be notified. My contact person is:

Name: _____

Telephone #: _____

Cell #: _____

I have the following allergies and/or special medical needs:

_____.

My primary care physician is:
Name: _____

Telephone #: _____

Address: _____

_____

I understand that students are required to have appropriate health insurance as a condition of participating in this program. I understand that if I am already on Case Western Reserve's student medical plan, I will be covered under that plan while in the host country to the same extent that I am covered in the United States. I understand that this includes medical evacuation under certain limited circumstances and kidnap insurance under certain limited circumstances. I also understand that if I am not on Case Western Reserve's student medical plan, Case Western Reserve is still providing medical insurance for me while abroad with limits that I have reviewed and understand. In certain instances, including non-emergency medical situations, I understand I may be required and be responsible for pre-paying for medical care and/or related costs and then seeking reimbursement afterwards. I understand my contact for more information on this matter is Wells Fargo, (304) 340-0253, the Third-Party Administrator for the student plan, from the hours of 7:00 a.m. to 7:00 p.m. EST, (if after hours there is a voice automated messaging system or try calling 800 624-8605). I understand I will have to present a certification that I am on the student plan to the program official.

I understand I will be responsible for all medical costs not reimbursed by insurance and that Case Western Reserve does not assume any responsibility with respect to any medical care and/or treatment I receive while in the host country. I also acknowledge that I am aware of special conditions that I may face in some foreign countries, and that the health care, medicines and related services may not be as readily available, or of a quality comparable to those in the United States.

5. Travel: Case Western Reserve may make changes to the program itinerary, including cancellation, at any time and for any reason. I will be responsible for any loss due to such cancellation or change. Case Western Reserve is not responsible for penalties assessed by air carriers or any other associated costs based on operational and/or itinerary changes. If I travel independently and arrive after the start of the program, I am responsible for all academic consequences such as lost class time and assignments. Case Western Reserve may substitute hotel accommodations or housing at any time. Specific room and housing assignments are within Case Western Reserve's sole discretion. Case Western Reserve, however, does not assume responsibility for the condition of any housing accommodations, and is not liable for any injuries or damages arising therefrom.

I must confirm departure and arrival times and locations with my program official. I understand I am responsible for getting myself to the airport 2 hours before departure. I also understand that the transportation in a foreign country may not be as reliable or subject to the same safety standards applicable to public carriers in the United States. I am responsible for my own personal belongings and that my property is transported at my risk. Case Western Reserve is not responsible for travel delays or lost property.

6. Spouses/Partners and Children: Case Western Reserve is not responsible for providing support for accompanying non-participants, i.e., spouses/partners and children when such accompaniment is permitted. I am responsible for obtaining medical insurance for any accompanying non-participants. Such persons cannot attend classes or other activities formally associated with the program. If such a person disrupts the program, it may be grounds for my dismissal.

7. Waiver: In the case of an emergency in which I cannot be reached, I authorize U.S. Embassies and Consulates to release information concerning my welfare and whereabouts to Case Western. In authorizing this release of information, I hereby waive 5 United States Code Section 522 (b) (8).

8. Passport/ATM/Credit Card: I am responsible for contacting both my bank and credit card company so that they know I will be overseas (I understand banks may become suspicious of large sums of money being transferred overseas and may stop my ability to access money believing it to be in my best interest). I am responsible for confirming that my ATM card can be used internationally.

I am responsible for bringing my Passport, ATM and credit cards (as needed) and medical insurance information with me.

I am responsible for having a copy of my passport to leave in a secure location in the host country, such as a hotel safe.

9. Release: In consideration for the opportunity to participate in the program, I hereby release and forever discharge Case Western Reserve, and its trustees, officers, employees, and agents from all legal claims for injuries, damages, or losses of any kind, which may arise out of my participation in this program.

10. Governing Law: I understand that any dispute arising from this Statement will be determined according to Ohio Law.

_____ _____

Signature Date

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