

Pre-Peer Review

Signatures and Dates Must Be Complete Prior To Distributing this Project Plan to Peer Reviewers

[Lead Scientist, CRIS # and Title]

This project plan was found to meet the peer review criteria, to be in compliance with the Project Plan Instructions and Format, and demonstrate how the research team will conduct research in a manner appropriate for this area of research. The funds committed toward this project are sufficient to support the planned research.

Research Leader

Date

This project plan was prepared by a qualified research team and demonstrates the research team's best effort towards achieving the assigned research objectives.

Center, Institute, or Lab Director

Date

This project plan is relevant to the Agricultural Research Service's National Program ___ Action Plan and was prepared in accordance with the outlined objectives, experimental approach, and project duration previously agreed to by the National Program Team and research team.

National Program Leader

Date

This project plan was prepared by a qualified research team and demonstrates the research team's best effort towards achieving the assigned research objectives. All internal review and approval requirements have been met. To validate the plan's readiness for implementation and gain recommendations for improvement, the project plan is now available for peer review.

Area Director

Date

These officials have not performed a scientific merit peer review. Their statements do not necessarily require expertise in the specific subjects associated with this research. The approval to implement this project plan cannot be made without scientific peer review coordinated by the Office of Scientific Quality Review, ARS, USDA.

Re-do this coversheet if the project plan requires a second peer review.

For labs that have a 3-tier organization structure (vs. the 4-tier organization that is implied on the signature page), you may combine the first and second signature block. If your lab uses a different title for the Research Leader or Center Director, you may edit the title lines accordingly.

Post-Peer Review

Signatures and Dates Must Be Complete Prior To Distributing this Project Plan to Peer Reviewers

[Lead Scientist, CRIS # and Title]

This project plan was revised, as appropriate, according to the peer review recommendations and/or other insights developed while considering the peer review recommendations. A response to each peer review recommendation is attached. If recommendations were not adopted, a rationale is provided.

Research Leader

Date

This final version of the project plan reflects the best efforts of the research team to consider the recommendations provided by peer reviewers. The responses to the peer review recommendations are satisfactory.

Center, Institute, or Lab Director

Date

This final version of the project plan reflects the best efforts of the research team to consider the recommendations provided by peer reviewers. The responses to the peer review recommendations are satisfactory.

National Program Leader

Date

The attached plan for the project identified above was created by a team of credible researchers and internally reviewed and recognized by the team's management and National Program Leader to establish the project's relevance and dedication to the Agricultural Research Service's mission and Congressional mandates. The project plan has completed a scientific merit peer review in accordance with the Research Title of the 1998 Farm Bill (PL105-185) and was deemed feasible for implementation. Reasonable consideration was given to each recommendation for improvement provided by the peer reviewers.

Area Director (original signature required)

Date