## PBHC 6980: CSU MPH Capstone Project Colorado School of Public Health

### **Project Proposal Summary**

Name:			
			Name and Affiliation of Capstone Faculty Advisor:
			Will your capstone project be with the same organization as your practicum? ☐ Yes ☐ No
			If yes please include the learning plan for the practicum with this proposal.
			Human Subjects
<b>Date completed Human Subjects training</b> (required whether or not you are doing a research project for your capstone):			
<b>IRB APPROVAL STATUS:</b> IRB is required of all students unless your project is not considered research (see below).			
If you are uncertain about the need for IRB approval, please review the information on the website below:*			
https://vprnet.research.colostate.edu/RICRO/irb/does-my-research-need-to-be-reviewed/			
☐ My project has been approved by the IRB (includes exempt, expedited and full-board reviewed studies)			
☐ <b>My project does not need IRB approval</b> (e.g., quality assurance, quality improvement, program evaluations, operational activity such as customer service initiatives, disease outbreak investigations, development of organization policies/procedures)			
*If you are still uncertain about IRB approval, after reviewing the website, please contact your capstone faculty advisor if you questions regarding the status of your project.			

Problem to be studied/project topic: (Include purpose, questions, aims, and hypotheses as relevant)
<b>Methods:</b> (Describe in detail what you are doing and how you are going to do it). As relevant, describe the project/study methodology, population, data source/survey to be used, study design, statistical analyses, grant writing, policy development, resource evaluation, etc.)
In <u>5 sentences</u> , describe the Public Health Impact of your project. (Use 5 sentences, no more, no less.)
<b>Anticipated product:</b> (What will be the deliverable(s) resulting from this project? For example, report to an agency, tested intervention materials for dissemination, grant proposal, statistical/epidemiologic summary to inform practice or policy, etc.)
Please select the choice that best describes your project:  The primary focus of my project will be creating or delivering a program that has direct benefit to the public/community.
The primary focus of my project will be conducting research, evaluation, or surveillance that will immediately translate to direct benefit to the public/community.
The primary focus of my project will be conducting research, evaluation, or surveillance that will eventually translate to direct benefit to the community/community.
The primary focus of my project will be conducting research, evaluation, or surveillance that will contribute to the body of scientific knowledge

**Timeline:** (What are the important steps for successful completion of your project and when will you complete each of them? Note – a timeline is a detailed listing of each step of your project. For example, when will you prepare your study materials, obtain your data, begin and complete your data analyses, begin and complete your Capstone paper, begin and complete your Capstone ppt presentation, etc). Include steps you have already completed. *Timelines can be bullet-pointed.* 

Note, you must have data/information gathered by approx. 4 weeks after the semester begins in the summer and approx. 7 weeks after the semester begins in the Fall/Spring. Please make sure your timeline denotes that your data will be collected by then.

**Potential problems/limitations**: (What potential problems do you anticipate and how will you address them and/or what are your study limitations and how do you expect them to affect the outcome of your study?)

**Competencies brought to the project:** (What do you bring to this project, skills gained from the MPH courses you have taken, previous experience, etc?) List <u>5</u> key competencies providing the coded number for each competency along with the competency from the MPH Competency list. Include at least one competency specific to your MPH concentration.

**Competencies to be gained through the project:** (What specific competencies will you be increasing/gaining through this project)? List <u>5</u> key competencies providing the coded number for each competency along with the competency from the MPH Competency list. Include at least one competency specific to your MPH concentration.

#### **Responsibilities of Capstone Preceptor**

The goal of the capstone project for the MPH student is to connect all aspects of the curriculum, including: seminars, lectures, course work, independent studies, projects and direct experiences to establish an understanding, appreciation and working knowledge of public health practice, and specifically, how their specific concentration enhances public health practice opportunities in Colorado, the nation and the world.

The capstone project should contribute to the needs of an organization (please refer to the guiding/core values on the first page).

The primary responsibilities of a host site and preceptor are to:

- Work with students to develop a realistic graduate level project within the capstone time commitment and student schedule
- Be available to meet with student, provide supervision, and feedback
- Provide resources for students to complete project (i.e. office space, computer, access to data)
- Provide written feedback for the student and the school by completing a final evaluation form

#### **Preceptor Benefits**

The capstone experience adds great value to the student's development and having a student professional also provides benefits to the host organization.

- Students complete or conduct projects the organization will hopefully be able to utilize
- Students provide an inquisitive approach and may provide creative ideas and solutions
- Students build professional capacity and gain new skills
- Organizations and preceptors have an impact on the field of public health by participating in the education of future professionals

# Signature of Preceptor

By signing here, I commit to providing guidance the project.	and mentorship to this student for the completion of	
Name (printed)		
Signature	Date	
Signature of Capstone Faculty Advisor		
By signing here, I attest that I have read the proposal and judge that:		
1) The project meets the expectations of the student's MPH concentration.		
2) The student has the necessary skills to complet necessary skills.	ete the project, or has a plan in place to gain the	
3) The student has access to the necessary ment methods/skills required.	orship for this project, related to subject area and	
4) The timeline presented is reasonable for the supcoming semester.	tudent to successfully complete the project during the	
Name (printed)		
Signature	Date	
Printed Name of Student		
Signature of Student		
	GNATURES ARE AQUIRED, T THIS DOCUMENT AS:***	
<b>Last Name_First Name_CapstoneProposal</b> (e.g., Smith_Joe_CapstoneProposal)  Do <i>not</i> save document as a PDF/image file.		
Do not complete past this line		
Registration Permission Number:	(available from Academic Support Coordinator)	