CE Application

**MPH Culminating Experience Academic Year:**

**Name:** Click here to enter text.

**Program:**
- [ ] MPH (1-Year Accelerated/Full Time)
- [ ] MPH (Part Time/Freestanding)
- [ ] MD/MPH
- [ ] PhD/MPH (Non DGP)
- [ ] DGP/MPH

**Project Title:**
*Note, this can be revised throughout the CE process*

Click here to enter text.

**Net-ID Number:** [6 Character Alpha-Numeric (ie ABC123)]: Click here to enter text.

**Contact Phone Number:** Click here to enter text.

**What Research Methodology Courses have you completed (or are currently enrolled)?**

- [ ] PH 421 Intermediate Biostats
- [ ] PH 416 Program Evaluation
- [ ] PH 437 Applied Epi Data Analysis
- [ ] PH 439 Qualitative Rsch Method
- [ ] PH 434 Data Analysis Tech for Health Services Outcomes Research
- [ ] Anthro 362 Quantitative Methods of Analysis
- [ ] PH 422 Intermediate Epi
- [ ] PH 431 Decision Analysis
- [ ] PH 438 Survey Design &Methodology
- [ ] PH 446 Clinical Trials
- [ ] PH 435 HSR Dsgn & Analysis Strat
- [ ] PH 425: Intro to GIS/Spatial Analysis
Advisory Group Information:

NU Faculty Advisory Group Member: Click here to enter text.
E-Mail Address: Click here to enter text.

Second Advisory Group Member: Click here to enter text.
Organization or NU Affiliation:
ex: “Blue Cross, Blue Shield”
“NMH Neurosurgery”
E-Mail Address: Click here to enter text.

Third Advisory Group Member (if applicable): Click here to enter text.
Organization or NU Affiliation:
ex: “Blue Cross, Blue Shield”
“NMH Neurosurgery”
E-Mail Address: Click here to enter text.
**Project Logistics:**

Expected Timeline of Project, including expected quarter of completion:

Click here to enter text.

Project Location (Organization/City/State/Country):

Click here to enter text.

What is the source of materials, supplies or data you will be using?

Click here to enter text.

Source and amount of funding, if any?

Click here to enter text.

Will your CE involve spending time at a non-Northwestern site? This includes, but is not limited to, program observation, use of facilities (bench labs, etc) and collecting data. If so please provide the name of the site and contact information. If no, please write N/A.

Click here to enter text.
Is your CE located at the same site of your Field Experience (FE)?

☐ Yes
☐ No

Is your CE being completed at an international site outside of the United States?

☐ Yes
☐ No

If your site is international, was it coordinated through the Northwestern Center for Global Health?

☐ Yes
☐ No
☐ N/A – My CE is being completed in the US

Any additional special considerations you would like to share with the PEC regarding the logistics of your project?

Click here to enter text.
IRB Considerations:

Does the proposed project involve human subject research of any kind? Please refer to this document for definitions. More information and support is available on the IRB Support Page of the CE Portal on Canvas or e-mail Maureen Moran m-moran@northwestern.edu for a consultation.

☐ Yes  ☐ No

Please elaborate: If yes, what is the status of your IRB Application? If no, please state why this study is not Human Subject Research?

Click here to enter text.

Competencies and Professional Development

Please explain how this project is relevant to your ultimate public health career goals

Click here to enter text.
### Competencies and Professional Development (Continued)

To what extent does the proposed project address the MPH Core Competencies? *(Check one for each competency)*

<table>
<thead>
<tr>
<th>Competency</th>
<th>In Depth</th>
<th>Some</th>
<th>Not at all</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Critically evaluate epidemiologic, prevention and health promotion, clinical outcomes, and health services research studies.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>b. Formulate a testable hypothesis relevant to public health and select and implement appropriate methods to test the hypothesis in an ethically appropriate fashion with contemporary information and computing resources.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>c. Formulate a testable hypothesis relevant to public health and select and implement appropriate methods to test the hypothesis in an ethically appropriate fashion with contemporary information and computing resources.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>d. Locate and interpret vital statistics and other population-based data.</td>
<td>☐</td>
<td>☐</td>
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</tr>
<tr>
<td>e. Identify population needs for primary, secondary, and tertiary prevention and describe population-based, organizational, and individual behavioral change approaches designed to restore, improve, and maintain health.</td>
<td>☐</td>
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</tr>
<tr>
<td>f. Identify challenges and opportunities that the economics and organization of health services create for maintaining and improving the public’s health.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>g. Describe the differences and overlap between clinical medicine and public health, identify ways in which the two disciplines can work in synergy, and recognize the advantages of interdisciplinary team work in achieving health objectives.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>h. Describe the differences and overlap between clinical medicine and public health, identify ways in which the two disciplines can work in synergy, and recognize the advantages of interdisciplinary team work in achieving health objectives.</td>
<td>☐</td>
<td>☐</td>
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</tr>
<tr>
<td>i. Develop advocacy strategies for public policies that advance health goals.</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>j. Demonstrate leadership potential as exemplified by effective writing, public presentation, and teaching</td>
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<td>☐</td>
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</tr>
<tr>
<td>k. Describe the history and traditions of public health and their relevance to current and future practice.</td>
<td>☐</td>
<td>☐</td>
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</tr>
</tbody>
</table>
To what extent does the proposed project address your respective concentration competencies?

### Epidemiology Competencies:

<table>
<thead>
<tr>
<th>Task</th>
<th>In Depth</th>
<th>Some</th>
<th>Not at all</th>
<th>N/A – Not an EPI Concentration Student</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify key sources of data for descriptive and analytic epidemiology studies</td>
<td>☐</td>
<td>☐</td>
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</tr>
<tr>
<td>Describe disease frequency and major risk factors for major causes of disease in the US after critical evaluation of the scientific literature and public health bulletins.</td>
<td>☐</td>
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</tr>
<tr>
<td>Develop appropriate plans for sample selection, data collection, data analysis (using statistical software), and data interpretation, for a given research question.</td>
<td>☐</td>
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</tr>
<tr>
<td>Describe the principles and limitations of public health screening programs.</td>
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</tr>
</tbody>
</table>

### Community Health Research Competencies:

<table>
<thead>
<tr>
<th>Task</th>
<th>In Depth</th>
<th>Some</th>
<th>Not at all</th>
<th>N/A – Not an CHR Concentration Student</th>
</tr>
</thead>
<tbody>
<tr>
<td>Describe behavioral, social, and cultural factors that contribute to the health and well-being of communities</td>
<td>☐</td>
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<tr>
<td>Describe the role and importance of community and stakeholder engagement in community health research, intervention, and evaluation.</td>
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</tr>
<tr>
<td>Apply program planning, assessment, and evaluation principles and develop logic models to create and evaluate community health programs and interventions.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Use relevant theories, methods, and research principles for designing and conducting community health research.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
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</tr>
</tbody>
</table>
CE Proposal:

For approval by the PEC, this application (including the proposal below) must be approved by each member of the advisory group.

If an in-person signature is not practical, advisory group members may send an email indicating their approval to PEC@northwestern.edu.

Student Signature: ___________________________  Date: ________________

Advisory Group Approval:

NU Faculty Advisory Group Member: ___________________________  Date: ________________

Advisor #2: ___________________________  Date: ________________

Advisor #3: ___________________________  Date: ________________
(if applicable)

Submission Instructions:

Students, please save (or scan if you have signatures) this form and upload to the CE Portal on Canvas.