

## APPENDIX A - SAMPLE REVIEW FORM

### MSTU Special Projects Funding Evaluation Review Form

Evaluation Review Form (Completed by Selection Committee members)

Rate each item with a check mark indicates the project meets the criteria.

**Organization Name:**

**Reviewer Name:**

**Program Name:**

#### PROJECT NARRATIVE

<b>Organizational Profile</b>	
1. Organization demonstrates capacity to effectively undertake the proposed project	
2. Proposed project supports the organization's mission	
<b>Organizational Profile Subtotal</b>	
<b>Community Need</b>	
1. Problem and needs are described and well assessed	
2. Application demonstrates that the project addresses an under-served need in the community	
<b>Community Need Subtotal</b>	
<b>Project Summary</b>	
1. Proposed project is fully described and understandable	
2. Project addresses gaps or needs in the community	
3. Applicant proposes to leverage other funding sources, if available, to achieve desired outcome	
<b>Project Summary Subtotal</b>	
<b>Project Outcomes</b>	
1. Goals and activities are detailed	
2. Timeline is defined and achievable	
<b>Project Outcomes Subtotal</b>	
<b>Alignment with Strategic Plan</b>	
1. Project aligns with Delivering First Class Service	
2. Project aligns with Promoting Public Health and Safety	
3. Project aligns with Practicing Superior Environmental Stewardship	
4. Project aligns with Fostering Continual Economic Growth & Vitality	
5. Project aligns with Maintaining Social, Economic, Cultural Equitability	
<b>Project Alignment Subtotal</b>	
<b>Budget</b>	
1. Funding request is reasonable for type and level of project	
2. Application demonstrates the ability to successfully execute project through defined budget	
<b>Budget Subtotal</b>	
<b>TOTAL CRITERIA ITEMS MET:</b>	
<b>Reviewer Signature:</b>	Date: