

# CFGRB Teens for Tomorrow Grant Application 2017

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*Community Foundation of the Great River Bend Grants*

## **Project Name**

Name of Project

*Character Limit: 100*

## ***2017 T4T Evaluation - After Site Visit***

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Please complete this evaluation for each of the Teens For Tomorrow grant applications you have been assigned, **after you conduct your site visit**. The scores from this application will be the **STARTING POINT** for discussion on your grant decisions - they don't have to be the final word.

You'll need to choose a number for each scoring item, or your form will not allow you to submit it. Comments are optional.

### **Connection to T4T Focus Areas\***

How strongly does the project connect to one of the 2017 T4T focus areas? (Education, Hunger, Mental Health, Refugee Services)

*1 is low connection, 5 is high connection.*

**Scoring Options:** 1 - 5

### **Connection to Focus Areas Comments**

*Character Limit: 500*

### **Coverage of Quad Cities area\***

Does the applicant either broadly cover the Quad Cities area, or if that is not feasible, does the applicant coordinate with other organizations to make sure it is part of a network so similar services are available throughout the Quad Cities?

1 is low coverage or coordination; 5 is high coverage or coordination

**Scoring Options:** 1 - 5

### **Coverage Comments**

*Character Limit: 500*

### **Effectiveness of the Project\***

Will the project be effective at achieving its goals to serve our community? This might be shown by the prior success or track record of the program or the organization.

*1 is low effectiveness, 5 is high effectiveness.*

**Scoring Options:** 1 - 5 or N/A

### **Project Effectiveness Comments**

*Character Limit: 500*

### **Quality of Project Plan\***

Does the project plan make sense? Is it organized and specific? Does it contain a clear budget outlining the use of T4T funds?

*1 is a low quality of plan, 5 is a high quality of plan.*

**Scoring Options:** 1 - 5

### **Quality of Project Plan Comments**

*Character Limit: 500*

### **Passion\***

How much passion does this organization show for its mission and the project/program it's applying for? This might be shown through excitement demonstrated in the application or site visit, by the effort put into the application, or a story of the experience of people helped by the project.

*1 is low passion, 5 is high passion.*

**Scoring Options:** 1 - 5

### **Community Support Comments**

*Character Limit: 500*

### **Impact of T4T Grant\***

Will a T4T grant (perhaps combined with other resources) make a difference to this project? This might be shown through a clear and specific budget showing the use of T4T dollars, or by demonstrating that the T4T grant will help the project go forward sooner (or at all).

*1 is low impact of a T4T grant, 5 is high impact of a T4T grant.*

**Scoring Options:** 1 - 5

## **T4T Grant Impact Comments**

*Character Limit: 500*

## **Overall Comments**

*Character Limit: 1000*

## **Funding Recommendation\***

After your review of the application and site visit, what is your initial recommendation for this grant? (Final recommendations will be decided on with the whole T4T group at the May meeting.)

### **Choices**

Full funding for this application

Partial funding for this application

No funding for this application

## **Funding Amount Recommendation\***

Please enter the amount you initially recommend for this grant application. If no funding, enter "0."

*Character Limit: 20*