

UNITED FUND OF IOWA COUNTY: Reviewers Evaluation and Recommendations Spring_____

Year

Reviewer: United Fund of Iowa County Board

Applicant and/or Project/Program/Event Name: _____

INSTRUCTIONS FOR REVIEWERS: Use this form as a guide for evaluating each application using the Application Guidelines and Tips sheet and the criteria listed below as the basis for your evaluation. This will help you discuss the application at the review meeting and should help you in making your funding recommendation. This form will become part of the UFIC's applicant file/binder. **Incomplete applications will not be considered for funding.**

Required Attachments:

- Proof of non-profit status
- If funded last year, fully completed Proof of Spending Form
- If funded last year, Proof that the grant was publicized,
- Does the application meet Iowa County residency requirements? (Question 13)
- Does the applicant practice non-discrimination? (Question 11)

IF ANY OF THE ABOVE FIVE BOXES ARE NOT CHECKED – STOP HERE. Proceed to Board Analysis.

1. **MERIT** Does the proposed project have merit? (Questions 13, 15, and 16)

2. **IMPLEMENTATION** Are the proposed activities feasible as planned with attainable objectives? (Question 14)

3. **MANAGEMENT** Is the project financially feasible and supported by a complete and reasonable budget? (Question 19)

4. **SUCCESS** Is the anticipated success reasonable & attainable? (Questions 15 and 17)

5. **PROMOTION OF UNITED FUND** Does the plan meet the expectations of United Fund? (Question 18)

6. **OVERALL ASSESSMENT OF THE PROPOSAL**

Amount Requested \$_____ Funding Recommendation: \$_____

The next page will be copied and sent to the applicant. Please include up to three comments for strengths and one or more for weaknesses and suggested improvements.



UNITED FUND BOARD OF DIRECTORS ANALYSIS SPRING _____
Year

Applicant Name: _____

Board Summary Review of the Application

A. Strengths (Suggesting up to 3)

B. Weaknesses (Suggesting 1 or more)

C. Suggested improvements for future applications (Suggesting 1 or more)

Amount Requested \$ _____ Award Amount \$ _____

**Thank You for applying,
United Fund of Iowa County**