



## Application Evaluation Form

*Note: the InMotion Network Participation Committee may use a number of criteria to make a decision upon a program grant application, including the criteria listed on page 2 of this Evaluation Form and other factors such as the number of participants, funding amount requested per participant, the number of previous programs hosted by the grant applicant, in-kind and other donations, and other program support.*

<b>Event Name and Location:</b>	Save as....
<b>Event Date:</b>	_____
<b>Funding Amount Requested:</b>	_____
<b>Number of Participants:</b>	Volunteers: _____
<b>Funding Amount Requested per Participant:</b>	#DIV/0! _____
<b>Evaluated By:</b>	Checked By: _____

### Applicant History

History on prior applications, including: number of prior applications, dates of events, amount funded, number of participants stated in application and number of attending participants, and final report submission.

### In-kind donations and other monetary support

List details, including estimated monetary value  
IMN contribution

## InMotion Network Grant Application Evaluation Form

The Participation Committee will rate each grant application using the following scale for each criterion listed below:

- 5 = Excellent
- 4 = Good
- 3 = Average
- 2 = Weak
- 1 = Poor

Note: The total percentage threshold, to consider an application for committee approval = 60%

Criteria	Rating	Comments/Questions
<b>In-kind donations and other monetary support.</b> Identifies sources of other monetary support or in-kind donations and/or a process for attaining such support or donations.		
<b>Volunteerism.</b> The number and extent of volunteer involvement.		
<b>Participation.</b> Stakeholders, partners, clients, beneficiaries, and funder representatives will participate in the planning, implementation and evaluation of the project.		
<b>Partnerships.</b> Identifies key partners in place and/or describes a process for partnering with local organizations and sponsors		
<b>Barriers to participation.</b> Efforts to reach participants that have barriers to participation (such as income, culture, proximity to services, obesity, previous health concerns, people with a disability, etc.)		
<b>Innovation/Creativity/Uniqueness.</b> The proposed concept is innovative and not redundant with other projects currently being run by the applicant.		
<b>Host Organization.</b> The organization/individual submitting the application has one or more of the following attributes: related mission and goals, credibility for this type of work, a history or track record of related achievements, unique position, and/or letters of support.		
<b>Honorariums/Swag.</b> The amount of funding requested being utilized in honorariums, swags, giveaways. Policy stipulates minimum reserve.		
<b>Overall Value.</b> The overall value of the project (the relationship of benefits to costs) is high.		
<b>Total Score</b>	<b>0</b>	<b>0%</b>
<b>Additional Comments:</b> Concerns:		
<b>Recommendation for Approval</b>	<b>Yes</b>	<b>No</b>
<b>Recommended Funding</b>	✓	✓