

Holy Trinity Special Grants Evaluation Form

Reviewer's name: _____

Proposal Title: _____

Proposal Review:

Criteria	Meets?	Comments
Project goal is clear and of importance to the mission of Holy Trinity	Yes No	
Project description sufficiently demonstrates that it is manageable with the resources requested and the personnel available and that it has the potential for a significant outcome	Yes No	
Budget is appropriate and reasonable	Yes No	
Time line, including plans for a final report, is appropriate	Yes No	
Plans for evaluation by the project coordinator(s) are clear	Yes No	
<i>Other criteria?</i>	Yes No	

General comments or questions:

Do you recommend for funding? Yes No