

EVALUATION CRITERIA

NGLA will primarily evaluate your application based on these five criteria

- The highest possible score is **26** (+2 for volunteer neighborhoods). Projects with the highest average total score will be recommended for funding. Projects must receive a **minimum average score** of “2” in sections “E,” “F,” “G,” and “H” and at least “5” in section “I” in order to qualify for funding.

E: Neighborhood Need: 15% = 0 to 4 points

Detail the neighborhood identified need, how it was identified, and why will the project improve the neighborhood?

- **Evaluation:** How compelling is this need, *from not compelling (0) to extremely compelling (4)*?
- **Questions to consider for evaluation:** Have residents identified a need for the project? Will it improve the neighborhood? Once this project is completed, what will it accomplish? How many people will this project impact? Will it enhance other aspects of the neighborhood by improving the quality of life? Is grant funding necessary to implement this project?

E: Neighborhood Need

F: Neighborhood Participation: 15% = 0 to 4 points

Describe how community members participated in identifying the need and creating the solution. How many people were involved and what role did they play?

- **Evaluation:** How involved were community members, *from not involved (0) to extremely involved (4)*?
- **Questions to consider for evaluation:** How was the project chosen, who participated? Is it managed by an HOA board or residents? Do residents support the project? If so, how is that support documented? Did residents participate throughout various phases of the project?

F: Neighborhood Participation

K: Revised Application Budget

Community Group: _____ Date: _____

- **How was the budget developed?** Residents or neighborhood committee research
- Price quotes from multiple contractors A price quote from one contractor City staff feedback

K: Revised Budget

Materials <i>(whole numbers, simplify grant lines)</i>	NIP Request	Contribution <small>(Neighborhood)</small>
	\$	\$
	\$	\$
	\$	\$
	\$	\$
	\$	\$
Labor and Services <i>(include the cost of all required permits and fees)</i>		
	\$	\$
_____ hours @ \$ _____/hour	\$	\$
	\$	\$
_____ hours @ \$ _____/hour	\$	\$
	\$	\$
_____ hours @ \$ _____/hour	\$	\$
	\$	\$
_____ hours @ \$ _____/hour	\$	\$
Community volunteer labor/planning:		
	n/a	\$
_____ hours @ \$ _____/hour		
Totals		
Total	NIP Request	Contribution <small>(Neighborhood)</small>
Total	\$	\$
TOTAL PROJECT COST <i>(NIP Request + Contribution)</i>	\$	
PERCENT OF TOTAL	%	%
City Contribution <i>As approved, Don't include in project totals</i>		
	Staff hours	Materials
	\$	\$
Estimated Annual Maintenance: \$	Budget Estimate Developed by:	

Refer to NIP Guidelines for directions; Project approval/city staff requirements are calculated by staff

L: Mandatory Contact Sheet

L: NIP Mandatory Contact Information Sheet

Grant applications are due to Community and Neighborhood Resources by January 12, 2023

- THIS PAGE WILL NOT BE MADE PUBLIC

NIP Grant Applicants Must:

- Evaluate all other NIP applications, but refrain from evaluating your own application.
- Provide contact information below.
- Complete a short project presentation at the January 19, 2023 NGLA meeting.
- Approved projects will be required to attend a mandatory implementation workshop.
- Meet all deadlines and remain eligible based on all other NIP funding criteria.
- Please confirm the Project Manager (primary) and secondary people responsible for the grant application and implementation (listed below) are committed to see the project through to completion.

L1: Project Manager

PRIMARY PERSON RESPONSIBLE FOR THE GRANT APPLICATION and IMPLEMENTATION

- Check here if this person is an NGLA representative?

Name: _____

Address: _____

Home Phone #: _____ Cell Phone #: _____

E-Mail: _____

L2: Second Contact

SECONDARY PERSON RESPONSIBLE FOR APPLICATION and IMPLEMENTATION

- Check here if this person is an NGLA representative?

Name: _____

Address: _____

Home Phone #: _____ Cell Phone #: _____

E-Mail: _____

L3: Ranking Contact

PERSON RESPONSIBLE FOR THE REVIEW AND EVALUATION OF ALL OTHER NIP APPLICATIONS

Is this the primary or secondary contact (skip below)? Primary Secondary

Name: _____

Address: _____

Home Phone #: _____ Cell Phone #: _____

E-Mail: _____