



Frenship Foundation for Leadership

PO Box 100

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Wolfforth, TX 79382

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www.frenship.us/foundation

Grant Reviewer Scoring Matrix

Application Number _____ Evaluator # _____

Project Title: _____

Please rank the effectiveness of each item with 3 being high and 1 being low. Circle the number that best describes each statement.

Criteria				Weighted Amount	Weighted Total
Need is clearly stated.	3	2	1	X3	
Objectives are specifically stated and measurable	3	2	1	X2	
Activities/procedures specifically stated and related to purpose and objective.	3	2	1	X3	
Innovation is apparent and promotes student curiosity, collaboration and communication	3	2	1	X3	
Evaluation process for effectiveness is clearly stated and relevant to the objectives and student performance	3	2	1	X2	
Budget is complete, realistic, accurate and appropriate	3	2	1	X2	
Grand Total					

Please check the statement below that best describes how you would rank this application

- ◇ I would definitely recommend funding this project.
- ◇ I would recommend partially funding this project. Suggested Amount: \$ _____
- ◇ I would recommend funding this project if there were extra money.
- ◇ I would not recommend funding this project.

Additional comments (please use back if necessary)