



**Tri-County EMC Bright Ideas Grant Program  
2024 Evaluation Form**

**Project Name:** \_\_\_\_\_ **Application #:** \_\_\_\_\_

**Evaluation Checklist**

Use the table below to rank each criteria from **1 - Total Points Available**, with 1 being the lowest score.

<b>Criteria</b>	<b>Total Points Available</b>	<b>Points Awarded</b>
Offers Creative/Innovative Learning Experiences for Students	20	
Helps Meet Student's Unmet Needs	15	
Provides Ongoing Benefits for Current and Future Students	20	
Directly Involves Students	10	
Clearly Defined Goals and Objectives	10	
Includes an Effective Implementation Plan	10	
Provides a mechanism for evaluating the project's success/outcome	10	
Provides an Adequate Budget Summary	5	

**Total Points Awarded of 100 pts:** \_\_\_\_\_

Comments:

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Rated By: (Judge's Name): \_\_\_\_\_