

NEW PROJECTS RATING TOOL

Print Blank Template

Print Report Card

Project Name: _____
 Organization Name: _____
 Project Type: _____
 Project Identifier: _____

New Projects
 Rating Complete
 0%

[Instructions on Awarding Points](#)

RATING FACTOR	POINTS AWARDED	MAX POINT VALUE
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EXPERIENCE

A. Describe the experience of the applicant and sub-recipients (if any) in working with the proposed population and in providing housing similar to that proposed in the application.	<input style="width: 100%;" type="text"/>	out of 15
B. Describe experience with utilizing a Housing First approach. Include 1) eligibility criteria; 2) process for accepting new clients; 3) process and criteria for exiting clients. Must demonstrate there are no preconditions to entry, allowing entry regardless of current or past substance abuse, income, criminal records (with exceptions of restrictions imposed by federal, state, or local law or ordinance), marital status, familial status, actual or perceived sexual orientation, gender identity. Must demonstrate the project has a process to address situations that may jeopardize housing or project assistance to ensure that project participation is terminated in only the most severe cases.	<input style="width: 100%;" type="text"/>	out of 10
C. Describe experience in effectively utilizing federal funds including HUD grants and other public funding, including satisfactory drawdowns and performance for existing grants as evidenced by timely reimbursement of subrecipients (if applicable), regular drawdowns, timely resolution of monitoring findings, and timely submission of required reporting on existing grants.	<input style="width: 100%;" type="text"/>	out of 5
Experience Subtotal	0	30

DESIGN OF HOUSING & SUPPORTIVE SERVICES

A. Extent to which the applicant <ol style="list-style-type: none"> 1. Demonstrate understanding of the needs of the clients to be served. 2. Demonstrate type, scale, and location of the housing fit the needs of the clients to be served 3. Demonstrate type and scale of the all supportive services, regardless of funding source, meet the needs of the clients to be served. 4. Demonstrate how clients will be assisted in obtaining and coordinating the provision of mainstream benefits 5. Establish performance measures for housing and income that are objective, measurable, trackable, and meet or exceed any established HUD, HEARTH or CoC benchmarks. 	<input style="width: 100%;" type="text"/>	out of 15
B. Describe the plan to assist clients to rapidly secure and maintain permanent housing that is safe, affordable, accessible, and acceptable to their needs.	<input style="width: 100%;" type="text"/>	out of 5
C. Describe how clients will be assisted to increase employment and/or income and to maximize their ability to live independently.	<input style="width: 100%;" type="text"/>	out of 5
Design of Housing & Supportive Services Subtotal	0	25

TIMELINESS

A. Describe plan for rapid implementation of the program documenting how the project will be ready to begin housing the first program participant. Provide a detailed schedule of proposed activities for 60 days, 120 days, and 180 days after grant award.	<input style="width: 100%;" type="text"/>	out of 10
Timeliness Subtotal	0	10

FINANCIAL

A. Project is cost-effective - comparing projected cost per person served to CoC average within project type.	<input style="width: 100%;" type="text"/>	out of 5
B. Audit <ol style="list-style-type: none"> 1. Most recent audit found no exceptions to standard practices 2. Most recent audit identified agency as 'low risk' 	<input style="width: 100%;" type="text"/>	out of 5

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3. Most recent audit indicates no findings	0	5
C. Documented match amount	0	5
D. Budgeted costs are reasonable, allocable, and allowable	0	20
Financial Subtotal	0	45

PROJECT EFFECTIVENESS

Coordinated Entry/ Participation- 95% of entries to project from CE referrals

Project Effectiveness Subtotal	0	5
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OTHER AND LOCAL CRITERIA

Other and Local Criteria Subtotal	0	0
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TOTAL SCORE	0	115
Weighted Rating Score		100

PROJECT FINANCIAL INFORMATION

Coc funding requested		-
Amount of other public funding (federal, state, county, city)		
Amount of private funding		
TOTAL PROJECT COST		\$ -

NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab