

Reviewer's Name: _____

RFA Name or Number: **RFA #: 2025.2.D: Proactive Approaches for People with I/DD**

Application Number: _____

Applicant Organization Name: _____

Name of Initiative: _____

The application should include information in each section that addresses how their agency proposes to address the intent of the Request for Application (RFA).

SCORING DIRECTIONS

If you believe the applicant's response **substantially satisfies** the intent of the question, assign a **score of 5 (five)**.

If you believe the applicant's response **more than satisfies** the intent of the question, assign a **score of 4 (four)**.

If you believe the applicant's response **satisfies** the intent of the question, assign a **score of 3 (three)**.

If you believe the applicant's response **weakly satisfies** the intent of the question, assign a **score of 2 (two)**.

If you believe the applicant's response **does not satisfy** the intent of the question, assign a **score of 1 (one)**.

If you believe the applicant's response **completely misses** the intent of the question, assign a **score of 0 (zero)**.

A total score of 25 (twenty-five) is possible in this review.

REVIEWER'S COMMENTS

Please be specific with your written comments. Specific, written comments/observations (positive or negative) are important to Council staff in giving feedback to applicants interested in improving grant applications in the future.

NC Council on Developmental Disabilities' competitive fund releases are reviewed objectively and without bias by a team of individuals, including Council members, who are knowledgeable and have experience in the concept that is being advanced by the Council.

The Application Scoring Form is designed as a guide to help you assess the responses received to our RFA using the questions provided in this form. All applications should be scored based on the applicants' ability to clearly address how their agency will carry out the intended purpose of the RFA. The Scoring Form helps judge the quality of the applications and to serve as a starting point for the team to make recommendation(s) for funding.

Applicant: _____

Date of Review: _____

Note: Application Review Committee members are strongly encouraged to read all applications once without assigning any scores to the application. After a second reading, review committee members normally feel much more comfortable and confident about the merits of each application and may more easily assign a score based on those merits.

Applicant: _____

Date of Review: _____

Evaluation Criteria		Written Comments
1. The proposal clearly describes what the applicant intends to do and what outcomes the applicant expects to see. An application that proposes doing all or most of the items in the Proposed Purpose and DELIVERABLES sections of the RFA will score higher than an application that proposes doing fewer of these items.		
2. The proposal substantially meets the intent stated in this RFA: invest in proactive approaches to criminal justice for people with intellectual and other developmental disabilities (I/DD) to keep them safe and to keep them out of the criminal justice system during interactions with law enforcement officials and/or first responders in emergency situations and in times of crisis.		
3. The proposal clearly describes the applicant’s experience doing this type of work as well as a plan for sustaining this work after NCCDD’s funding ends. Applicants with more experience will score higher than applicants with less experience doing this work.		
4. The overall impact of the proposal on the systems change and capacity building to help people with I/DD live full and meaningful lives in the community and keeping them safe in their community.		
5. The applicant has proposed strong, measurable outcomes beyond merely reporting on the number of people who participate in a training or a learning opportunity. An application that proposes strong, measurable outcomes with opportunities to follow up on what participants learn will score higher than an application with weaker or less measurable outcomes.		
6. The proposed budget is clear and also reasonable in relation to the work that the applicant proposes.		

Applicant: _____

Date of Review: _____

Total Points: _____ (Maximum Score Possible: 30)

Reviewer's Initials: _____

REVIEWER'S RECOMMENDATION:

_____ I recommend this application for full funding.

_____ I recommend this application for partial funding. Recommended Funding Amount: _____

_____ I recommend this application for funding with the following contingencies:

_____ I DO NOT recommend this application for full funding.

Reviewer's Name (Print): _____ Reviewer's Signature/Date: _____