

2023-2024 College Ambassador Program - Reviewer Form

Reviewer Name: Applicant Name:

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| **Evaluation Criteria** | **Points Possible** | **Score** |  |
| **Incorporation of the FASD Prevention Message** |  |  |  |
| Are there specific details on how the FASD prevention message will be shared? Will eachattendee/participant be sure to hear and understand this message? | 10 |  |  |
| Do the activities *(e.g., games, trivia, demonstrations)* specifically help build a better understanding of the risks associated with prenatal alcohol exposure and the importance of preconception health and plannedpregnancies? | 5 |  |  |
| Are the activities engaging and creative? | 5 |  |  |
| Is there a clear alternative listed for a virtual event, if needed? | 5 |  |  |
| Are students included in the planning and/or implementation of the event? | 5 |  |  |
| **Subtotal** | **30** |  |  |
| **Overall Reach** |  |  |  |
| Is this event planning to reach a minimum of 50 participants? | 10 |  |  |
| Is the attendance goal realistic? | 5 |  |  |
| If this is a repeat event, are they growing their reach year-to-year? If this is a new event, is their reachappropriate given the size of their community? | 5 |  |  |
| Is there a clear benefit to granting to the proposed recipient *(e.g., this activity could not be equally well**achieved by Proof Alliance directly)*? Are Proof Alliance grant funds critical to the success of this event? | 5 |  |  |
| **Subtotal** | **25** |  |  |
| **Diversity of Audience** |  |  |  |
| Will a diverse range of age groups and/or racial groups be reached? | 5 |  |  |
| **Subtotal** | **5** |  |  |
| **Marketing and Promotion** |  |  |  |
| Is there a clear promotional plan to publicize the event? | 5 |  |  |
| Will a variety of promotional channels be used? *(e.g., flyers, mailings, emails, radio, TV, community boards,**social media)?* Are these channels appropriate for reaching the desired audience? | 5 |  |  |
| Is the promotional plan adequate for reaching the stated attendance and educational goals? | 5 |  |  |
| **Subtotal** | 15 |  |  |
| **Sustainability** |  |  |  |
| Is there a clear and detailed implementation plan for the event? | 10 |  |  |
| Is there a planning committee or community support for the event via sponsors, donors, or collaborators? | 5 |  |  |
| **Subtotal** | 15 |  |  |
| **Financial Budget** |  |  |  |
| Is there a clear and detailed description of what each category’s funding will be used for? | 5 |  |  |
| Are the proposed expenses necessary to host an effective, engaging event? | 5 |  |  |
| **Subtotal** | **10** |  |  |
| **Total Score** | 100 |  |  |

**Is the budget appropriate?** ☐ Yes ☐ No If no, state what budget would be reasonable:

Do you recommend this event concept for funding? ☐ Yes ☐ No

Comments/Concerns: