

Grant Application Go/No Go Checklist

Threshold Criteria

1. Project is eligible
2. Village is eligible
3. Sufficient time and staff resources available to prepare and submit an application.
4. Minimum of 2 Strategic Fit criteria must be met

Strategic Fit (minimum of 2 criteria must be a 'Yes')

Our project fits with funding agency priorities and target populations.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Our project fits with Board priorities or is included in a Village board adopted plan.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Our project meets a documented community need.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
The project is a Departmental priority or core service provided by the Village.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

Financial and Grant Management

The project is included in the Capital Improvement Plan or departmental budget.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
A local match is not required or local funds are budgeted to meet match requirements.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
No additional staff resources are required or funds are budgeted for additional staff.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Current processes are sufficient to meet grant management & reporting requirements.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
We have plans to sustain the project after the grant is over or project will be completed.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

Capability and Readiness

We have a well-developed program/project plan, budget and implementation schedule.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Staff have the experience and capacity to implement the project.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Funding does not impose additional State and Federal requirements (construction).	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
We have successfully completed similar projects in the past.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Our current infrastructure and technology is sufficient to implement the project.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

Collaboration and Support

We have documented community support for this project or none is needed.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
We have the necessary partnerships in place or partnerships will not be needed.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
We will be able to obtain letters of support in time or none are required.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
We have secured funding commitments from partners or none are needed.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Relevant VOP departments have been consulted & are supportive or none will be involved	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

18/19 Total Score

Count total number of criteria that confirmed as a Yes:

1-9 = Do Not Apply

10-14 = Consider Applying

15-19 = Apply