

# INDIVIDUAL REVIEWER FORM – PROGRAM DESIGN

## 2013 AmeriCorps State and National Grant Competition

Legal Applicant: [Click here to enter text.](#)

Application ID: [Click here to enter text.](#)

Reviewer Name: [Click here to enter text.](#)

Panel #: [Click here to enter text.](#)

### Program Design

Assess the extent to which the applicant addresses each of the Program Design elements. Provide comments and select a Rating for each element. All comments should address the significant strengths and weaknesses identified in your assessment that contributed to the selected Rating.

To what extent did the applicant's response address the following Selection Criteria:

#### I. NEED

The applicant provides persuasive evidence that the identified needs exist in the targeted community(ies). The applicant describes the community problem(s) they will work on. The applicant provides documentation of the extent/severity of the need in the target community. The applicant describes the target community including whether it is economically disadvantaged. The applicant explains why they selected this population to serve.

Select a Rating below

Excellent (5)

Above Average (4)

Average (3)

Below Average (2)

Poor (1)

Provide comments to justify the Rating you selected:

#### II. AMERICORPS MEMBERS AS HIGHLY EFFECTIVE MEANS TO SOLVE COMMUNITY PROBLEMS

The applicant describes AmeriCorps member activities, roles and/or responsibilities clearly and provides specific examples. The applicant describes what the organization will accomplish that it would not otherwise accomplish through existing staff and/or volunteers. The applicant describes the number of AmeriCorps members requested and what slot types are needed. If the applicant is requesting several different slot types, they describe how the proposed slot types align with their program design and activities.

Select a Rating below

Excellent (5)

Above Average (4)

Average (3)

Below Average (2)

Poor (1)

Provide comments to justify the Rating you selected:

# INDIVIDUAL REVIEWER FORM – PROGRAM DESIGN

## 2013 AmeriCorps State and National Grant Competition

Legal Applicant: [Click here to enter text.](#)

Application ID: [Click here to enter text.](#)

Reviewer Name: [Click here to enter text.](#)

Panel #: [Click here to enter text.](#)

### III. EVIDENCE-BASED/EVIDENCE-INFORMED AND MEASURABLE COMMUNITY IMPACT

The applicant describes how the interventions the AmeriCorps members and volunteers are engaged in are either evidence-based or evidence-informed. The applicant describes how the proposed interventions will have a measurable community impact and explains the impact of the AmeriCorps investment. The applicant describes the overall change they expect to see and what demonstrable impact their program will have. The applicant describes how they will measure that impact and how they determined their performance measure targets.

Select a Rating below

Excellent (5)

Above Average (4)

Average (3)

Below Average (2)

Poor (1)

Provide comments to justify the Rating you selected:

Total Score: \_\_ (of 15)

#### \*USE OF COMMENTS FOR APPLICANT FEEDBACK

*After the panel discussion and finalizing your assessment, your comments will be used as part of a summary for the purpose of applicant feedback.*