

## EFSP APPLICATION SCORING SHEET

Agency \_\_\_\_\_ Program \_\_\_\_\_

Categories	Rating				
	Lowest				Highest
Application was clear and complete	1	2	3	4	5
Budget was clear and appropriate	1	2	3	4	5
Program demonstrates ability to provide services	1	2	3	4	5
Need is clearly described and appropriate	1	2	3	4	5
The services are unduplicated by other services	1	2	3	4	5
Agency collaborates and coordinates services	1	2	3	4	5
Agency demonstrates outreach to customers	1	2	3	4	5
Food services are available to public or clients one or more days per week	1	2	3	4	5
Shelter programs have some sort of case management or additional support is offered	1	2	3	4	5

Total Score

RECOMMENDED

Amount Shelter \_\_\_\_\_

Amount Food \_\_\_\_\_