| NEW PROJECTS RATING TOOL | | | |
|---|-------------------|--------|--------------------|
| Project Name: | | | |
| Organization Name: | | | |
| Project Type: | | | |
| Project Identifier: | | | |
| | POINTS AWARDED | | MAX POINT VALUE |
| RATING FACTOR EXPERIENCE | | | |
| Experience Subtotal | 0 | out of | 0 |
| | | | |
| DESIGN OF HOUSING & SUPPORTIVE SERVICES | | | |
| Design of Housing & Supportive Services Subtotal | 0 | out of | 0 |
| TIMELINESS | | | |
| Timeliness Subtotal | 0 | out of | 0 |
| FINANCIAL | | | |
| B. Audit | | | |
| Financial Subtotal | 0 | out of | 0 |
| PROJECT EFFECTIVENESS | | | |
| Project Effectiveness Subtotal | 0 | out of | 0 |
| EQUITY FACTORS | | | |
| Agency Leadership, Governance, and Policies | | | |
| Recipient has BIPOC individuals in managerial and leadership positions | | out of | 10 |
| Recipient's board of directors includes representation from persons with lived experience | | out of | 10 |
| Recipient has process for receiving and incorporating feedback from persons with lived experience | | out of | 10 |
| Recipient has reviewed internal policies and procedures with an equity lens and has a plan for updating policies that currently center white dominant culture | | out of | 10 |
| Program Participant Outcomes | | | |
| Recipient has reviewed program participant outcomes with an equity lens, including the disaggregation of data by race, ethnicity, gender identity, and/or age | | out of | 10 |
| Recipient has identified programmatic changes needed to make program participant outcomes more equitable and developed a plan to make those changes | | out of | 10 |
| Recipient is working with HMIS lead to develop a schedule for reviewing HMIS data with disaggregation by race, ethnicity, gender identity, and or/age | | out of | 10 |
| Equity Factors Subtotal | 0 | out of | 70 |
| OTHER AND LOCAL CRITERIA . | | | |
| Other and Local Criteria Subtotal | 0 | out of | 0 |
| | | | |
| TOTAL SCORE | 0 | out of | 70 |

| | NEW PROJECTS RATING TOOL | | E | |
|---|---|-------------------|----------|--------------------|
| Project Name: | | | | |
| Organization Name: | | | | |
| Project Type: | | | | |
| Project Identifier: | | | | |
| RATING FACTOR | | POINTS AWARDED | | MAX POINT VALUE |
| | Weighted Rating Score | | out of | 100 |
| | PROJECT FINANCIAL INFORMATION | | | |
| CoC funding requested | NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab | | \$ | |
| Amount of other public funding (federal, state, county, city) | | | | |
| Amount of private funding | | | | |
| TOTAL PROJECT COST | | | \$ | |