

**MICHIGAN CAMPUS COMPACT
VENTURE GRANT
Review Process Form**

Grant Number: _____ Institution: _____

Project Name: _____

Please rate each proposal according to the points possible listed.

- a) Fits the overall mission and purpose of the MCC Venture Grant Program:
- fosters the habit of lifelong involvement in service and/or civic engagement
 - provides innovative models for use at other colleges and universities
 - contributes to further developing the institution's community service and/or service-learning program and/or civic engagement efforts
- _____/10
- b) Description of demonstrated problem(s) or need(s) addressed by the project within the community
- _____/20
- c) Description of project activities and timeline
- _____/20
- d) Potential for impact on students, campus, and community
- _____/20
- e) Planned evaluation of project
- _____/10
- f) Potential for sustainability after grant
- _____/10
- g) Budget: use of funds and appropriate match
- _____/10
- TOTAL** **_____/100**

What are the proposal's strengths? (Please be specific and write legibly)

What are the proposal's weaknesses? (Please be specific and write legibly)

Funding Recommendation: (Please circle) Fund Fund with Recommendations Do Not Fund

Signature of Venture Grant Committee Member

Date

FAX to: 517.492.2444 Attn: Amanda Schafer