**Community Fund Advisory Committee Application Assessment**

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| **Applicant Name:** |  |
| **Reviewer Name:** |  |

**Eligibility Criteria –** Applicants must meet all criteria below to be eligible:

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| --- | --- | --- |
| **1** | Applicant is a resident of the town. | Yes No |
| **2** | Applicant is 14 years of age or older. | Yes No |
| If applicant is under 18 years of age, parental consent has been provided. | Yes No  |
| **3** | The applicant is not an elected official. | Yes No |

**Assessment Criteria** – Applicants who score the highest on the criteria below are ideal candidates:

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| --- | --- | --- |
| **Criteria** | **Score from 1 – 5****1= lowest 5=highest** | **Comments** |
| The applicant clearly communicates their interest in the Community Funds program. |  |  |
| The applicant demonstrates proactive leadership skills, a collaborative style, problem-solving savvy and/or other traits useful for group work. |  |  |
| The applicant can bring a new or unique perspective on behalf of the community, and/or a perspective not often represented in community discussions. |  |  |
| The applicant appears able to commit time to serve on the advisory committee. |  |  |
| The applicant will be able to appropriately manage their conflicts of interest. (Answer N/A if uncertain.) |  |  |
| **Total Score:** |  |  |
| **Final Comments:** |