

**The Office of Equity, Diversity, and Inclusion  
PED GRANT Applicant Review Evaluation**

**1. APPLICANT INFORMATION**

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Name of Applicant:

Event/Program Title:

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Gross Amount of Project:

Net Amount of Proposed Funding:

**2. RUBRIC CRITERIA SCORING**

<b>Criteria of the rubric</b>	<b>Please grade your score</b> <i>With 0 being the lowest and 4 being the highest.</i>
College's Mission and EDI Initiatives	
Impacts on Campus Community	
Inclusive Programming	
Budget	
Clarity of Proposal	
Total Score	

**3. COMMENTS:**

**4. GRANT APPROVAL:**       Yes (please indicate amount approved below)

No

**5. APPROVED AMOUNT :**