	1	NEW PROJECTS RATING TOOL				
Project Name: ECCM RRH 1 (22)		Print Blank Template		Print Report C	Card	
Organization Name: Erie County Ca	re Management		Rating Complete			
Project Identifier:	22	Met all threshold requirements	0%	Instructions on Awarding Points		
RATING FACTOR				POINTS AWARDED		MAX POINT VALUE
				AWANDLD		VALUE
EXPERIENCE				·		
A. Describe the scope of the proposed project.					out of	15
B. Describe experience with utilizing a Housing First approach.					out of	25
C. Describe experience in effectively utilizing and leveraging federal, s	tate local and provate sector	funds and performing the activities proposed in the application, ${\mathfrak{g}}$	given funding and time limitations. Describe		out of	25
the basic organization and management structure of the applicant. Ir	clude evidence of internal an	d external coordiantion and an adequate financial acccounting sy	ystem.		00101	23
	Fxpe	rience Subtotal		0	out of	65
				5	outor	
DESIGN OF HOUSING & SUPPORTIVE SERVICES						
					out of	20
A What consider along does this project have to considerably constitue to	and integrate with other mai	netroom boolth cosial convision and ampleument programs for wh	hich program participants may be aligible?			
A. What specific plan does this project have to specifically coordinate and integrate with other mainstream health, social services, and employment programs for which program participants may be eligible?						
B. Describe the plan to assist clients to rapidly secure and maintain permanent housing that is safe, affordable, accessible, and acceptable to their needs.					out of	10
	Design of Housing 8	k Supportive Services Subtotal		0	out of	30
TIMELINESS					1	
	Time	liness Subtotal		0	out of	0
FINANCIAL						
B. Audit						
C. Documented match amount					out of	10
D. Budgeted costs are reasonable, allocable, and allowable					out of	20
	Fina	incial Subtotal		0	out of	30
PROJECT EFFECTIVENESS						
	Proiect Ef	fectiveness Subtotal		0	out of	0

		Ν	EW PROJECTS RATING TOOL				
Project Name: ECCM RRH 1 (22)			Print Blank Template	Print Report Card			
	Organization Name: Erie County	/ Care Management		Rating Complete			
	Project Identifier:	22	Met all threshold requirements	0%	Instructions on Awardin		rding Points
RATING FACTOR					POINTS AWARDED		MAX POINT VALUE
OTHER AND LOCAL CRITERI	IA						
Application Completion and	d Accuracy					1	20
Other and Local Criteria Subtotal					0	out of	20
						, 	
TOTAL SCORE					0	out of	145
						1	
Weighted Rating Score					0	out of	100
		PROJEC	CT FINANCIAL INFORMATION				
CoC funding requested			NOTE: Edit on the LIST OF PROJECTS TO BE REVIEWED tab			\$	158,198
	iding (federal, state, county, city)						
Amount of private funding							
TOTAL PROJECT COST						\$	158,198