Professional Development Funding Requests Evaluation Rubric

Description	0 Point	1 Point	2 Points	Total
Proposal meets one or more of the	Meets none of the authorized	Meets one of the authorized	Meets more than one of the	
Authorized uses for PD funds	uses	uses	authorized uses	
Proposal meets one or more of the SCC	Meets none of the strategic	Meets one of the strategic	Meets more than one of the	
Strategic Goals	goals	goals	strategic goals	
Proposal provides a narrative that	No connection	Connection is weak, implicit,	Connection is strong and	
explicitly connects the activity to the		or unclear	explicit with clear details	
Authorized Uses & SCC Strategic Goals				
Must have scored at least 4 points total k	petween the first three items to co	ontinue with evaluation.		
Previously approved PD funding	Applicant received funding	Applicant received funding within	Applicant has not received	
	within the past two (2) fiscal	the past two (2) fiscal years	funding within the past two	
	years	but narrative justifies need for	(2) fiscal years	
	Amount: \$	this activity		
Extent of Benefit	Activity benefits the individual	Activity benefits the individual	Activity benefits the district	
		plus others at the college	and/or greater community	
Explicitness of Benefits	Narrative does not indicate	Narrative generally indicates	Narrative clearly specifies	
	benefits of activity	benefits of activity	benefits of activity with	
			examples	
Planned Dissemination of Information	Narrative does not provide a	Narrative provides a general	Narrative provides a detailed	
	plan for sharing experience or	plan for sharing experience	plan for sharing experience	
	applying knowledge	and/or applying knowledge	and applying knowledge	
☐ Bonus points (2): applicant presented previously PD funded activity to others on campus			Total Points:	
☐ Bonus points (2): applicant is prese				
	- В			
corings				
<u>coring:</u>				
-14 points = Approval				

<u>Scoring:</u> 8-14 points = Approval 6-7 points = Additional information required 0-5 points = Denied		
Name:		
Grant □ Approved □ Denied	If approved, amount: \$	Grant number:
Date approved/denied:	Comments:	
Date applicant notified:		
Professional Development Coordinator		Date
Out-of-State Travel: \square NA \square Approved \square	Denied	
Superintendent/President	Date	