

**Michigan AEYC Debbie Antone Memorial Fund Grant Rubric**

<b>Applicant Name</b>	<b>Focus</b>			<b>Amount</b>	<b>Reviewer</b>
<b>Criteria</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>Points</b>
1. Tell us about your education and experience, including any ongoing training.	No response	Brief statement with no details or a listing.	Includes a description about their experience and/or education/training.	All of column 2; details about how or why they pursued their educational path; describes why they selected the ongoing training they did.	
2. Tell us about the children and families in your program, including how many and the ages of the children and some demographic information about the families.	No response	Brief statement with no details or a listing of children.	Description includes number and ages of children; number of families; schedules of the children in care; and brief description of families.	All of column 2; information about the types of families; how many families are using subsidies; relationship with families.	
3. Tell us about the curriculum you use and/or your approach to guiding the children's learning. Describe your daily schedule.	No response	Brief statement naming the curriculum or generalizing about the activities.	Includes name of curriculum and why it was chosen or the approach to children's learning; a brief daily schedule.	All of column 2; gives more details about the schedule and choice of curriculum; and describes their approach to children's learning.	
4. Tell us exactly what you will spend the grant monies on. Give very specific brand names of items and/or PD class(es). Tell us why you want these things and how they relate to what you are currently doing in your program.	No response	Statement of PD/items to buy and why they want them.	Name and description of items requested for their project; how the requested PD/items will relate to the children and activities in their program.	Detailed description of the project; how it fits with their other programming; how will this project make your program better.	

5. Explain in detail how these items and/or professional development class(es) will benefit your children and/or families.	No response	Very brief response or one that doesn't answer the question.	Brief description of benefits to children or families.	Detailed description of the developmental benefits to children and the relationships with families.	
6. How will this project help you with the State Quality Improvement Process?	No response	Brief response.	Statement that describes the activities they are doing to raise the quality of their program.	All of column 2; details how this project will fit into their goals for improving the quality of their program.	
7. Financial Need: Describe your program's need for this grant.	No need presented	Provides a sentence or two on need.	Provides a descriptive rationale for the need of the grant supported by 1-2 details.	Column 2 plus: Provides a descriptive and compelling rationale for the need of grant supported by 2-3 details.	
8. Budget	If there is no budget, they are ineligible.	Incomplete	Complete but additional information, if needed, is not included.	Form is completed accurately; any additional information needed is included in paragraph after the form.	
<b>TOTAL POINTS</b>				<b>Maximum 24 points</b>	