

Ohana Momma's

Name of Applicant

Matt Dodson

Name of Reviewer

Tourism Grant Application
Selection Criteria Summary
(Tourism Review Panel scoring)

Score Weight Points

(1-5) _____ 5 _____

How well does/will this project increase tourism?
Will it encourage longer-term or repeat visits?

(1-5) _____ 5 _____

Does the applicant have the ability to complete the project?
Are the budget and marketing plan realistic?
What is the potential to succeed?
Is management and/or administration capable?

(1-5) _____ 2 _____

Is there demonstrated community support?
Is there evidence of in-kind support?
Are there endorsements by community groups?

(1-5) _____ 1 _____

Is the presentation clear, concise and attractive?

(1-5) _____ 2 _____

Is there a strong evaluation method?
How will the applicant document the impact?
Are the outcomes measurable and objective?

SUB-TOTAL POINTS: _____

Add Preference Points

0-10 _____

Event held during the Shoulder Season – before June and after September

0-10 _____

Event held outside of the Klamath Falls urban growth boundary

0-10 _____

Length of Stay – event encourage early arrival and/or late departure

0-10 _____

Family Friendliness

Deduct Penalty Points

-10 _____

Previous tourism projects not completed on time or final evaluation not submitted on time

-5 _____

Vague or rambling responses.

TOTAL POINTS _____

Reviewer Conflict of Interest:

Comments: Would this create an overnight stay? Doesn't currently have community support like other sponsorship grants

Doesn't meet funding cycle

Do you recommend this project for funding: YES NO Partial funding: \$ _____

Olana Marianne Snowflake
Name of Applicant Festival

Orlie Van Broekhoven
Name of Reviewer

Tourism Grant Application
Selection Criteria Summary
(Tourism Review Panel scoring)

Score	Weight	Points	
(1-5) <u>3</u>	5	_____	How well does/will this project increase tourism? Will it encourage longer-term or repeat visits?
(1-5) <u>3</u>	5	_____	Does the applicant have the ability to complete the project? Are the budget and marketing plan realistic? What is the potential to succeed? Is management and/or administration capable?
(1-5) <u>4</u>	2	_____	Is there demonstrated community support? Is there evidence of in-kind support? Are there endorsements by community groups?
(1-5) <u>2</u>	1	_____	Is the presentation clear, concise and attractive?
(1-5) <u>3</u>	2	_____	Is there a strong evaluation method? How will the applicant document the impact? Are the outcomes measurable and objective?
SUB-TOTAL POINTS:			_____
<u>Add Preference Points</u>			
0-10		_____	Event held during the Shoulder Season – before June and after September
0-10		_____	Event held outside of the Klamath Falls urban growth boundary
0-10		_____	Length of Stay – event encourage early arrival and/or late departure
0-10		_____	Family Friendliness
<u>Deduct Penalty Points</u>			
-10		_____	Previous tourism projects not completed on time or final evaluation not submitted on time
-5		_____	Vague or rambling responses.
TOTAL POINTS			_____

Reviewer Conflict of Interest: need to apply in Spring Cycles

Comments: _____

Do you recommend this project for funding: YES NO Partial funding: \$ _____

Orana Mommas
Name of Applicant

Jessie Halloway
Name of Reviewer

Tourism Grant Application
Selection Criteria Summary
(Tourism Review Panel scoring)

Score	Weight	Points	
(1-5) _____	5	_____	How well does/will this project increase tourism? Will it encourage longer-term or repeat visits?
(1-5) _____	5	_____	Does the applicant have the ability to complete the project? Are the budget and marketing plan realistic? What is the potential to succeed? Is management and/or administration capable?
(1-5) _____	2	_____	Is there demonstrated community support? Is there evidence of in-kind support? Are there endorsements by community groups?
(1-5) _____	1	_____	Is the presentation clear, concise and attractive?
(1-5) _____	2	_____	Is there a strong evaluation method? How will the applicant document the impact? Are the outcomes measurable and objective?
SUB-TOTAL POINTS:			_____
<u>Add Preference Points</u>			
0-10		_____	Event held during the Shoulder Season – before June and after September
0-10		_____	Event held outside of the Klamath Falls urban growth boundary
0-10		_____	Length of Stay – event encourage early arrival and/or late departure
0-10		_____	Family Friendliness
<u>Deduct Penalty Points</u>			
-10		_____	Previous tourism projects not completed on time or final evaluation not submitted on time
-5		_____	Vague or rambling responses.
TOTAL POINTS			_____

Reviewer Conflict of Interest: _____

Comments: does not meet cycle

Do you recommend this project for funding: YES NO Partial funding: \$ 0

OHANA SNOWFLAKE FEST
Name of Applicant

CHIP MASSIE
Name of Reviewer

Tourism Grant Application
Selection Criteria Summary
(Tourism Review Panel scoring)

Score	Weight	Points	
(1-5) <u>0</u>	5	<u>0</u>	How well does/will this project increase tourism? Will it encourage longer-term or repeat visits?
(1-5) _____	5	_____	Does the applicant have the ability to complete the project? Are the budget and marketing plan realistic? What is the potential to succeed? Is management and/or administration capable?
(1-5) _____	2	_____	Is there demonstrated community support? Is there evidence of in-kind support? Are there endorsements by community groups?
(1-5) _____	1	_____	Is the presentation clear, concise and attractive?
(1-5) _____	2	_____	Is there a strong evaluation method? How will the applicant document the impact? Are the outcomes measurable and objective?
SUB-TOTAL POINTS:			_____
<u>Add Preference Points</u>			
0-10		_____	Event held during the Shoulder Season – before June and after September
0-10		_____	Event held outside of the Klamath Falls urban growth boundary
0-10		_____	Length of Stay – event encourage early arrival and/or late departure
0-10		_____	Family Friendliness
<u>Deduct Penalty Points</u>			
-10		_____	Previous tourism projects not completed on time or final evaluation not submitted on time
-5		_____	Vague or rambling responses.
TOTAL POINTS			_____

Reviewer Conflict of Interest: _____

Comments: Does not meet criteria

Do you recommend this project for funding: YES NO Partial funding: \$ _____

OM Lujan

MAR Rouse

Name of Applicant

Name of Reviewer

Fall 2013 Tourism Grant Application
Selection Criteria Summary
(Tourism Review Panel scoring)

Score Weight Points

(1-5) 1 5 5

How well does/will this project increase tourism?
Will it encourage longer-term or repeat visits?

(1-5) 2 5 10

Does the applicant have the ability to complete the project? ?
Are the budget and marketing plan realistic?
What is the potential to succeed?
Is management and/or administration capable?

(1-5) 1 2 2

Is there demonstrated community support?
Is there evidence of in-kind support?
Are there endorsements by community groups?

(1-5) 1 1 1

Is the presentation clear, concise and attractive?

(1-5) 1 2 2

Is there a strong evaluation method?
How will the applicant document the impact?
Are the outcomes measurable and objective?

SUB-TOTAL POINTS: 20

Add Preference Points

0-10 5

Event held during the Shoulder Season – before June and after September

0-10 _____

Event held outside of the Klamath Falls urban growth boundary

0-10 _____

Length of Stay – event encourage early arrival and/or late departure

0-10 _____

Family Friendliness

Deduct Penalty Points

-10 _____

Previous tourism projects not completed on time or final evaluation not submitted on time

-5 -5

Vague or rambling responses.

TOTAL POINTS 20

Reviewer Conflict of Interest:

Comments: So little detail on how the money will be spent
Encourage applicant to work w/ JC at D Klamath.
And to review other successful grant proposals.
Not answer questions re posed.

Do you recommend this project for funding: YES NO Partial funding: \$ 0