**CE-FCS AMBASSADORS PROGRAM**

**Dorothy Blackwell Legacy Award**

(Complete the top portion of the form and attach to the back of application)

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| **Name of Applicant(s):** | | |
| **Title of Proposal:** | | |
| **Instructions for Selection Committee:** Indicate the score which best describes your rating of the application on the criteria listed below. The maximum number of points for each item is designated at the end of the item, with a total of 100 points. | | |
| **Checklist/Score Sheet** | **Correct/**  **Revise** | **Score** |
| Application was submitted by deadline |  |  |
| Applicant(s) provided documentation of **donation to FCS Ambassadors**  in the past 12 months |  |  |
| The project will be completed within one to three years of the award; Plans to spend  award between July 1 of year awarded and June 30 of following year of each year for projects spread over multi-year period |  |  |
| Up to 5 pages long, typed & **double** spaced |  |  |
| At least 1” margins on all around, Using font size 12 |  |  |
| **1)Project is significant to OCES for families &/or youth (20)** |  |  |
| **2) Project Proposal: (30)**   * Situation Statement; Objectives; Collaborators; Detailed outline of project * The applicants are one or more counties collaborating with FCS Extension Educators, OHCE members, etc. * Designed to create educational opportunities with community agencies * Application of results will further programs with families &/or youth * Plan to provide Report up to 5 pages, & a Summary Report up to 2 pages (appropriate for media & newsletter purposes). |  |  |
| **4) Background of applicant (5)** |  |  |
| **5) An in-depth educational program including a component of Family Resource Management (15)** |  |  |
| **6) Includes collaboration with the appropriate state specialist and others (15)** |  |  |
| 7) **Proposed Budget (5)** |  |  |
| * Expenses involved in implementing the proposed award. * Funds in this proposal will be for training educators, educational materials program evaluations, etc. * Budget developed for the duration of the entire project, plan for multi-year award payments, if applicable. * Other funding sources designated. |  |  |
| **9)** **Letter of Recommendation** from supervisor is attached. **(10)** |  |  |