Mental Health Student Services Act Project

Round 2: Sub-Grant Application Review and Scoring

Applications will first be separated into two categories: MHSSA school partners and non-school partner organizations. Priority will be given to MHSSA school partners based on the purpose of the MHSSA grant and Tri-City's specific project. School partner applications will be reviewed, scored, and ranked first (from highest score to lowest score). Sub-grant funds will be awarded starting with the highest score and continuing in rank order until all eligible school partner applicants receive an award.

Once all MHSSA school partner applications have been reviewed, scored, and ranked, and sub-grant funds are still available, Tri-City will go through the same review, score, and rank process with non-school partner applications to determine remaining sub-grant awards.

Applications will be reviewed and scored based on completeness of the applicant's response to each prompt. Points will be assigned based on responses meeting MHSSA project requirements, including the quality and reasonableness of items asked for in the prompts. The more complete the response, the more points will be awarded up to the total points designated for each question. Applicants that meet the threshold score (30 points—at least 60% of the total 50 available points) will be eligible to receive a sub-grant award.

Application Scoring Criteria								
Response does not address the question		Response is partially complete with minimal reasonableness	Response is partially complete with some reasonableness	Response is partially complete with more reasonableness and quality	co rea	sponse is fully mplete with great asonableness and ality		
0% of available points		1-39% of available points	40-69% of available points	70-89% of available points		-100% of available ints		
Scoring								
Section Question		on	Scoring considerations		Grade/Points			
Applicant information								
1	Entity		Agency/organization name, website, and phone number provided=Pass Missing agency/organization name, website, and phone number=Fail			Pass or Fail		
2	Main contact		Main contact name, title/position, email, phone, number and address provided=Pass Missing main contact name, title/position, email, phone, number and address provided=Fail			Pass or Fail		
3	3 Authorized representative		Authorized representative name, title/position, email, phone, number and address provided=Pass Missing Authorized representative name, title/position, email, phone, number and address provided=Fail			Pass or Fail		

4	Formal system(s)	At least one option (including None/not applicable) is selected=Pass No option is selected=Fail	Pass or Fail
5	Community(-ies) served	At least one community is selected=Pass No community selected=Fail	Pass or Fail
Proposed	project description		
6	Project name	Project name provided=Pass No project name provided=Fail	Pass or Fail
7	Project start and end dates	Project start and end dates provided=Pass No start and end dates provided=Fail	Pass or Fail
8	Proposed project description Completeness, quality, and reasonableness of alignment with MHSSA program purpose; of project timeline, people involved in implementation, and location(s) of project and services		0-10 points
9	Support systems	ystems At least one option is selected=Pass No option is selected=Fail	
10	Need Completeness, quality, and reasonableness of description of problem being addressed		0-10 points
11	Use of MHSSA sub-grant Completeness, quality, and reasonableness of allowable costs		0-10 points
12	Benefit to ["high-risk"] youth and families	Completeness, quality, and reasonableness of impact of project and services	0-10 points
13	School level(s)	At least one school level is selected=Pass No school level is selected=Fail	Pass or Fail
14	"High risk" population(s) focus	At least one population is selected=Pass No population is selected=Fail	Pass or Fail
15	Goals At least one goal is selected=Pass No goal is selected=Fail		Pass or Fail
16	Support services	At least one support service is selected=Pass No support service is selected=Fail	Pass or Fail
17	Other response strategies	Completeness, quality, and reasonableness of additional information about meeting children and youth mental health needs as necessary	0-10 points
Financial	information	•	
18	Sub-grant amount request	Sub-grant amount for proposed project provided=Pass Sub-grant amount for proposed project missing=Fail	Pass/Fail
19	Proposed project budget amount for proposed project provided=Pass Budget amount for proposed project missing=Fail		Pass/Fail
20	Sub-grant budget	Sub-grant budget provided with application=Pass Sub-grant budget missing or incomplete=Fail	Pass/Fail

21	Sub-grant budget narrative	Sub-grant budget narrative provided=Pass Sub-grant budget narrative missing or incomplete=Fail	Pass/Fail			
22	W-9	W-9 provided with application=Pass W-9 missing or incomplete=Fail	Pass/Fail			
Certificat	Certification					
23	MHSSA sub-grant disbursement requirements	Both certification boxes checked=Pass One or neither certification box checked=Fail	Pass/Fail			
24	Authorized signature	Signature of authorized representative provided=Pass Signature missing or not matching authorized representative name=Fail	Pass/Fail			
	50					
	30					