

Vaccination Community Outreach Grant Program 2.0 Next Steps

Welcome to the COVID-19 Vaccination Community Outreach Grant Program 2.0. This document contains feedback from the review of your request for funding including any revisions or clarifications needed on your submitted document before your Purchase Order can be finalized.

Organization Name: City of Racine

Amount Awarded: \$100,000.00

Revisions and Clarifications Needed

- **Scope of Work:** No revisions or clarifications needed
- **Budget:** No revisions or clarifications needed
- **Incentive Form Needed:** No

Request for Funding Feedback Sheet

The below chart contains feedback on the written proposal submitted for the second round of the Vaccination Community Outreach Grant Program. This chart is designed to provide feedback for any future grant applications you may submit. If you have any questions please email:

DHSCOVIDVaccineOutreachGrant@dhs.wisconsin.gov.

Population Served	Reviewer Feedback
Demonstrates an understanding of the barriers faced by the identified group	Agree
Clearly describes strategy to address those barriers in order to promote greater equity	Agree
Described strategies will not exacerbate inequities and meet the needs of the community	Agree
Demonstrates that the organization or the individuals who will conduct the activities are known and trusted by the intended audience	Agree
Demonstrates the individuals who will conduct the activities reflect the identified group of focus	Agree
Project Information	
Applicant fully describes how activities will help promote equity and reduce disparities among	Agree

marginalized populations in COVID-19 vaccination uptake	
Activities that are described will clearly address the barriers identified by the applicant	Agree
There are no activities that are not aligned with public health guidance about COVID-19	Agree
Activities align with the project timeline (i.e., can be started within one month and will be complete by 10/31/2022)	Agree
Milestones are fully described and achievable within the project period	Agree
Partnerships	
Applicant fully describes existing partnerships with good working relationships that will help complete the activities described in the project plan and meet the outcomes provided by the applicant	Agree
Applicant demonstrates experience and ability to collaborate with others to achieve common goals	Agree
Applicant provides information about how the partnership(s) will be beneficial to achieving the project goals	Agree
Expenses/ Budget	
Applicant provides a clear, line-item budget in which all criteria are met	Agree
Expenses support the purpose of the project and align with the proposed activities	Agree
Expenses are allowable (minor revisions may be requested)	Agree
Overall Score (percentage)	100