

Agency Advisor Form

Thank you for your willingness to serve as an agency advisor. Please fill in the information below and submit this form via email, postal mail, or fax to the Ohio Lake Erie Commission no later than *one week* after the grant due date provided to you by the project director.

Name: _____ Title: _____

State Agency: _____ Phone: (____) _____

Email: _____ Date: _____

Grant Title: _____

Organization: _____ Project Director: _____

Please respond to the following: (1) Is this project consistent with your agency's goals and work plans? (2) What level of involvement have you had in the application's development? (3) Are the proposed methods and/or practices sound? (4) What role, if any, will you play in project implementation? (5) What are the pros and cons of the project? (6) Is there other information the grants committee should take into consideration when reviewing this application?