



SZ FPZ LOCAL
 MAM BIRD
 OTHER

TITLE OF PROGRAM OR PROJECT: _____

PRIMARY SPECIES INVOLVED: _____

PROJECT TIMELINES (START/END DATES): _____

AMOUNT REQUESTED: _____

Principal Investigator and/or Program Contact: (If additional contacts please list on back)

Name and Title:

Institution/Organization:

Address:

Phone:

Fax:

E-mail:

Proposal Signoff Date: _____ *Final Score:* _____

_____ *has reviewed this proposal and voted to:*

Name of Conservation Committee Member

Support this Proposal as *Q4C* *or* *CRPF US\$* _____

Proposal needs additional input and/or clarification to evaluate Responsible party to obtain data: _____

Not Fund this Proposal *or* *Put on Hold*
Reason:

Committee Leader: _____ *Date:* _____

Conservation Program Review Form

Please regard this form as a means to determine funding eligibility for Q4C and CRPF conservation programs. Questions may have one or more answer and score points multiple times in a single question. If you cannot find enough information to answer a question, please contact the primary program contact with a list of the information you are seeking. If you are unsuccessful, note this next to the question and alert the committee chairperson. Tally the score at the end and list final score on cover page. Your review will be presented to the committee and the highest scoring programs will be given priority when considering for funding.

Section 1: Species and Habitat supported by the program

1. What is the species IUCN status? (Can substitute US Fish and wildlife or CITES status)
 - Critically Endangered (8)
 - Endangered (7)
 - Vulnerable (6)
 - Near Threatened (5)
 - Least Concern (4)

2. Does the program support species in ZNE's collection?
 - Yes (10)
 - ZNE has very closely related species (8)
 - ZNE will have in the immediate future(6)

3. Is the species in the program or the program itself TAG supported or an AZA SSP (or group similar i.e EAZA etc.)?
 - YES (6)

4. Is there a critical reason ZNE should support this species/program? Examples include: emerging disease, time constraint, natural or manmade disaster, population crash, immediate financial need etc.

- YES (8) (if yes, must explain)

5. Does the program have a habitat preservation or restoration focus?

- Yes (6)

Additional notes:

Section 1: TOTAL: _____

Section 2: The programs itself - Goals, objectives and past accomplishments

1. How well established is the program? (please list partners below if applicable)
 - Very established, proven success –accomplished principle investigators and partners (10)
 - Not established, but has accomplished principle investigator - needs support/partners (8)
 - Not established, but starting up and looking for support/partners – principle investigators are accomplished (6)
 - Not established, principle investigators are unknown but has support/partners – (4)

2. Does the program have Conservation merit: support of ecological, policy or social science problem, species management or conservation status? (both answers can apply)
 - Social (2)
 - Scientific (2)

3. Is the program run by an individual or organization we want to develop a relationship with for branding, political, media, and/or collection reasons?
 - Yes (4)

4. Does the program support projects of sound design (feasibility/logistics)?
 - Program has clear and measurable goals (5) (If yes, can get additional points below)
 - a. Access to **animals** and/or **habitat/study site** (1)
 - b. Sufficient **personnel** to achieve program goals (1)
 - c. Sufficient **time** to achieve program goals (1)
 - d. Sound **budget** (1)
 - e. Access to **additional funding** (1)

Additional notes:

Section 2 TOTAL: _____

Section 3: The programs education components and community involvement

1. Does the program aid in establishing and implementing strong conservation education programs in situ and/or ex situ? (both can apply)
 - Yes, in situ (5)
 - Yes, ex situ (3)

2. Does the program involve community members in the project (employment, volunteer or social)?
 - Yes (5)

3. Does the program offer information and/or materials (photos, videos, or PowerPoint presentations) that ZNE could use for educational, promotional, or related ZNE programming?
 - Yes (2)

Additional notes:

Section 3: TOTAL: _____

Section 4: ZNE staff involvement in Program

1. Is there a ZNE board or staff member working with or vested in the Program?
 - Yes (8)

2. Does the program provide opportunities for direct involvement of ZNE staff or volunteers
 - Yes (5)

3. Has ZNE funded the program in the past (NO POINTS)
 - YES or NO
 - Please list years and level of support if applicable:

Additional notes:

Section 4: TOTAL: _____