ATTACHMENT C

MULTNOMAH COUNTY HEALTH DEPARTMENT HEALTHY PEOPLE HEALTHY PLACES GRANTS

APPLICATION CHECKLIST & INSTRUCTIONS

Application Checklist

- Application Cover Sheet
- Project Narrative
- Budget Form
- Up to three letter(s) of support

Instructions

- Complete and sign application Cover Sheet
- Fill in blanks or replace the instructions with your own information in the boxes and tables.
- Complete budget form
- Collect up to three letter(s) of support
- Submit one (1) original and two (2) copies.
- Application packets must be received by Multnomah County Health Department before 4:00 PM on December 1, 2010.
- Late applications or those not complying with these instructions will not be considered.

Application may be emailed, mailed or dropped off to:

Mail:	Heidi Leibbrandt, Contracts
	Multnomah County Health Department
	10317 E Burnside Street
	Portland, OR 97216
Drop off:	Front desk, 10317 E Burnside St for hand delivered applications

The application forms, supporting health data, maps and resources are located at the Multnomah County Health Department CPPW web site: <u>www.web.multco.us/health</u>.