

A Systems Approach for Reducing the Burden of Asthma in New York State

Applicant Checklist

- ☐ Cover Page
- ☐ Application Narrative
 - ☐ Program Summary
 - ☐ Statement of Need
 - ☐ Coalition Program Plan
 - ☐ Agency Capacity and Experience
 - ☐ Staffing Structure and Partnerships
 - ☐ Program Monitoring and Evaluation
- ☐ Attachments
 - ☐ Attachment 4 – Completed and Signed Tobacco-Free Policies Form
 - ☐ Attachment 5 – Completed and Signed Comprehensive Healthy Foods Policy Status and Intent Form
 - ☐ Attachment 6 – (Appendix D) Completed Work Plan
 - ☐ Attachment 8 – (Appendix B) Completed Budget Forms
 - ☐ Attachment 10 – Signed Vendor Responsibility Attestation
 - ☐ Attachment 12 – Completed Targeted Service Area Worksheet
 - ☐ Organizational Chart
 - ☐ Letters of Support/Commitment