



## Grant Information

- Name of Grantor Agency that you are applying to:
- Title of Grant:

## Request or Contact Information

- Agency Name:
- Requestor Name:
- Phone Number:
- Email:
- ODH Contact Name:

## Please Answer the Following Questions

- What populations are you planning to reach?
- Are you compliant with the Uniform Guidance Requirements? ☐ Yes ☐ No
- Type of Agency: ☐ Local Government ☐ Non-profit ☐ Educational Institution  
☐ State Agency ☐ Other (Please list)
- Is there a specific person within ODH that needs to sign? ☐ Yes ☐ No  
If yes, who?
- How does your project align with ODH's mission, vision, and core values?

## Request Information

- Is this letter of support a requirement of the grant application? Yes No
- What date do you need a signed letter of support?
- To whom should the letter of support be addressed?
- What email address would you like the signed letter to be sent to?
- Grant Application Deadline:
- Grant Period:
- Is this a continuation, expansion, or new project? Continuation Expansion  
N New Project
- Brief summary or abstract of the proposed project/program:
- Briefly describe your needs assessment process. What data supports the need?
- Amount of funds being requested?
- Are matching funds required? Yes No
- Please list your partners or collaborators:
- If a continuation or expansion project, please document the current outcome attainment to date:
- Do you know of any other projects submitting an application? If yes, please list. Yes No
- How will you sustain the program after the funding is gone?
- What are the expected measurable outcomes of the project/program?

**Attach a Draft Letter of Support (Word, .doc file types only)**