

Home4Good Request for Interest (RFI)

Complete and return to seibertc@delcohsa.org by noon on 8/1/18

Organization Name			
Eligible Use – from above list		Estimated Funding Request	\$
Estimated Number of Persons to be served in 12-month period		Target Population(s)	
Critical Need			
Brief summary of proposed program scope			
Proposed staffing			
Proposed partnerships and or leveraged resources			
Performance objectives			

Authorized Person: _____ Date: _____