

BCHD LETTER OF INTENT	
1. Agency Name	Click here to enter text.
2. Agency Address	Click here to enter text.
3. Name, telephone and email of agency CEO, project director, and contact person for the bid	Click here to enter text.
4. Bid Title	Click here to enter text.
5. Project Focus Area (Check all that apply)	<p>Communications Outreach (Check all that apply)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Website <input type="checkbox"/> Graphic Design <input type="checkbox"/> Translation <input type="checkbox"/> Television Ad(s) <input type="checkbox"/> Radio Ad(s) <input type="checkbox"/> Digital Ad(s) <input type="checkbox"/> Social Media <input type="checkbox"/> SMS Texting <input type="checkbox"/> Focus Group(s) <input type="checkbox"/> Polling <input type="checkbox"/> Video and Audio Testimonials <input type="checkbox"/> Canvassing
6. Total BCHD funds requested	Total \$Click here to enter text.
7. A description of the applicant agency (maximum 250 words): Click here to enter text.	
8. Has the applicant agency received BCHD funding in prior years? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, describe how your agency meets the definition of the eligibility criteria? Click here to enter text.	
9. A description of the bid including: the services the vendor will provide with a description of operations and ability to adjust level of services based on evolving state of COVID-19 (maximum 300 words): Click here to enter text.	

INSTRUCTIONS FOR BCHD VACCINATION CAMPAIGN LETTER OF INTENT

Line 1. The formal name of the applicant's agency which must match the name included on official tax forms/audit documents.

Line 2. The main address of the agency as found on official tax forms/audit documents.

Line 3. The name, telephone number, and email addresses of the applicant agency's CEO, project director and, if different, the contact person for the project.

Line 4. The title of your proposed project.

Line 5. Please check the focus area of the proposed project.

Line 6. The funds that will be requested for the entire bid.

Line 7. A description of the applicant agency, including its mission, its history of providing services in the community, and its history with **grant**-funded programs. The description should not exceed 250 words.

Line 8. Yes/No – Has your agency received funding from BCHD in prior years. If no, please demonstrate how your agency meets the eligibility requirements as described in the grant eligibility section of the RFP.

Line 9. A description of the project, the services the vendor will provide with a description of operations and ability to adjust level of services based on evolving state of COVID-19.