The National Association of State Alcohol and Drug Abuse Directors

and

The National Prevention Network

present

The 2010 National Exemplary Awards for Innovative Substance Abuse Prevention Programs, Practices, and Policies

Short Title: 2010 Exemplary Awards

APPLICATION PACKET

Award Ceremony to take place at the 23rd Annual NPN Research Conference in Denver, Colorado
The 2010 National Exemplary Awards for Innovative Substance Abuse Prevention Programs, Practices, and Policies

“2010 Exemplary Awards”

APPLICATION PACKET

Sponsored by

National Prevention Network
Affiliate of the National Association of State Alcohol and Drug Abuse Directors, Inc.

NASADAD
NATIONAL ASSOCIATION OF STATE
ALCOHOL/DRUG ABUSE DIRECTORS

With Support From

The Center for Substance Abuse Prevention
Substance Abuse and Mental Health Services Administration
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ACKNOWLEDGEMENTS

The staff of the National Association of State Alcohol and Drug Abuse Directors (NASADAD) would like to thank the Center for Substance Abuse Prevention (CSAP) for its continued financial support for this project. We also thank members of past review panels who provided valuable feedback as we updated and re-worked the Call for Applications; and to all members of the National Prevention Network (NPN), without whom the effective and widespread dissemination of this product would not be possible.

Finally, sincerest thanks go to each and every program, practice and policy that submitted an application for this award. We wish our colleagues further success in this very important field of substance abuse prevention.
INTRODUCTION

The National Association of State Alcohol and Drug Abuse Directors (NASADAD) and its subsidiary organization, the National Prevention Network (NPN), are pleased to present this CALL FOR APPLICATIONS for the 2010 National Exemplary Awards for Innovative Substance Abuse Prevention Programs, Practices, and Policies (2010 Exemplary Awards). Since its inception over two decades ago, this program has sought to identify and honor outstanding achievements in substance abuse prevention throughout the United States.

The 2010 Exemplary Awards identify and recognize quality substance abuse prevention efforts from around the country to include policies and practices, in addition to “traditional” prevention programs. For example, specific changes brought about in communities - such as responsible retailing practices, smoke-free workplace ordinances and other environmental approaches - are invited to participate in this Call for Applications.

Applicants planning to nominate a program or practice may find it helpful to refer to the Center for Substance Abuse Prevention’s (CSAP) Strategic Prevention Framework (SPF), a logic model that outlines the components of a successful program, practice, or strategy. The SPF may guide the prevention practitioner in designing and implementing an effective strategy that includes five (5) distinct, related steps: conduct a needs assessment; build capacity; develop a strategic plan; implement activities and strategies; and evaluate.

Exemplary Awards applicants will find this framework useful as they conceptualize and describe their own programs. The five steps of the Strategic Prevention Framework have been incorporated into this year’s Exemplary Awards application. Refer to Appendix B for a description of the SPF.

The Exemplary Awards program highlights innovation in the field of substance abuse prevention. As the field broadens and matures, proven prevention strategies and practices can be adapted and tailored to new populations or venues, address emerging problems and trends, and incorporate common sense evaluations.

The 2010 Exemplary Awards showcase evidence-based, state-of-the-art substance abuse prevention programs that may be replicated by others. These awards serve to focus national attention on the field of substance abuse prevention. The 2010 Exemplary Awards recipients will be recognized at the National Prevention Network’s annual Research Conference in Denver, Colorado in September 2010.
WHAT YOU CAN EXPECT FROM US
Exemplary Awards applicants can expect the organizers of this program to assist and support the application process:

- Every attempt will be made to **broaden the outreach efforts of this program**. This will be accomplished by working with the Center for Substance Abuse Prevention (CSAP), Community Anti-Drug Coalitions of America (CADCA), the National Prevention Network (NPN), Join Together, and others.

- The application will incorporate the **Strategic Prevention Framework's** steps that include Needs Assessment, Capacity Building, Strategic Planning, Implementation and Evaluation.

- **An unrestricted mini-grant of $1,650 to Exemplary Awards winners.** It is anticipated that the top-scoring applications (2-4) will receive the Exemplary Awards. In addition, depending on the number of winners, 1-2 members from each winning organization will be flown to the **NPN Research Conference** where they will receive their award and have the opportunity to showcase their program in a **poster session**.

- The Exemplary Awards program recognizes excellence in the field and considers applications describing **prevention-related practices and policies**, as well as **“traditional” programs**.

- Each applicant’s **Congressional delegation will be notified**. Since the Exemplary Awards program is national in scope, winning applicants should receive national recognition.

- NASADAD will host a **technical assistance conference call** for interested applicants on **Monday, May 24, at 3 pm Eastern**. Call (888) 872-2038, input code 88227# when prompted.

WHAT WE MEAN BY “INNOVATIVE”
Community demographics are changing throughout the United States, and as a result, prevention programs and strategies will have to stay abreast of these changes. Adapting a program that has been developed for one specific population to a different population is perfectly acceptable, as long as the program implementers are faithful to their new population’s culture, gender, age, etc., and that community need justifies the adaptations made to the original program. “To thy own community be true” should serve as a common refrain.

Innovative programs, policies, or practices may elicit environmental change, designed to directly impact public health and safety. These environmental objectives can include limiting retailers’ hours of operation, adopting clean indoor air laws, implementing server trainings, and so forth. Implementers of these kinds of strategies are welcome to apply to this awards program.
ELIGIBILITY CRITERIA

To be considered for the Exemplary Awards the applicant must be:

- A prevention program, practice, or policy. The primary purpose of the 2010 Exemplary Awards is to honor the wide array of substance abuse prevention efforts (e.g.; prevention of underage alcohol consumption, methamphetamine use, smoking tobacco, environmental change, etc.).

- Able to document success in a logical, quantifiable manner. The applicant should ask, “What difference did implementing this program, practice, or policy make in the population or on my community?”

- Nominated by an organization familiar with your work, such as a local or state governmental health department, NASADAD, NPN, CADCA, Join Together, or the U.S. military, for example.

SELECTION PROCESS

This year’s review process will use the process that has been utilized for several years (Figure 1). Applications will undergo a review by a group of professionals who will meet for a face-to-face meeting in Washington, D.C. to thoroughly critique the applications and determine those that will be awarded “exemplary” status.

BENEFITS OF THE EXEMPLARY AWARD

An unrestricted, mini-grant to the amount of $1,650 will be awarded to the Exemplary Awards winners, (approximately 2-4).

Application submitted to NASADAD reapply next year

Panel review not accepted

Awards winners notified

Congressional delegations notified

Awards ceremony & poster session at NPN Research Conference in Denver, Colorado

Figure 1 - Flow-chart for the Exemplary Award application/review cycle

NASADAD will notify the winning applicants’ Congressional delegations, (their U.S. Senators and Representatives). Hopefully, giving Members of Congress a sense of what is happening in their home districts will be beneficial to the winning applicants and will increase awareness of your prevention efforts.

Up to two members of each winning application will be flown to the NPN Research Conference scheduled for August 31- September 3 in Denver, Colorado. Winning applicants will be awarded at a breakfast session among approximately 1,000 of their peers, and will have the opportunity to exhibit aspects of their program during a poster session during the conference.
APPLICATION PROCEDURE

Applications will be made available to download from the NASADAD web site (www.nasadad.org). Applications will be sent to each NPN Representative in the 50 States, District of Columbia, and Atlantic and Pacific territories for distribution.

Applications must be postmarked and one digital copy sent via email to MAumen@nasadad.org by Monday, June 14, 2010. The cover page of each application must contain the signature and contact information for both the applicant and the national agency that is nominating the applicant. The completed original application plus three (3) additional photocopies are to be sent to the NASADAD offices in Washington, DC:

NASADAD/NPN
1025 Connecticut Avenue, NW Suite 605
Washington, DC 20036

ATTENTION: Exemplary Awards

TIMELINE

Call for applications May 3
Technical assistance conference call May 24, 3 pm Eastern *
Application postmark/ email June 14
Deadline
Panel reviews completed Week of July 26
Winning Applicants notified Aug. 3
Congressional delegations notified Aug. 23-24
Awards ceremony (held at NPN Research Conference) Sept. 2
Feedback letters to non-awarded applicants Oct. 15

*Call-in number is (888-872-2038, code 88227#)

The 2009 Exemplary Awards winners (along with Fran Harding, CSAP Director, top center) at the annual NPN Research Conference in Anaheim, California. [photo courtesy One Moore Photo]
INSTRUCTIONS FOR PREPARING THE APPLICATION

The Exemplary Awards application is designed to solicit detailed, descriptive information on how and why a program, strategy, or practice was created and implemented, and to capture the processes that led to the intervention’s demonstrated success. This information will serve as the basis for understanding the merits of the program, practice, or policy.

This application incorporates the five steps of the Strategic Prevention Framework (SPF):
1) needs assessment
2) building capacity
3) strategic planning
4) implementation
5) evaluation
Please refer to Appendix B to learn more about the SPF.

BEFORE YOU BEGIN

Please keep the following considerations in mind as you prepare your application:

1. All responses should be single-spaced typed on only one side of the paper with 1-inch margins and a 11 to 12-point font. All pages should be numbered and accounted for in the table of contents.

2. The total application must not exceed 25 pages including the cover sheet, abstract, table of contents, organizational chart, and budget page. Applications may be fewer pages, so long as each of the application elements is addressed.

3. Attachments, (e.g.; videos, newspaper clippings) or appendices are not allowed. All attachments will be discarded and will not be reviewed as part of the application.

4. Note that the cover sheet requires a signature of the program or agency director and the signature of the nominating organization. These signatures indicate that the application has been reviewed and is accurate.

5. Applicants must follow the order and exact headings as shown below to present information about their application. The cover sheet, table of contents and abstract should be one page each, three pages subtotal.

- Cover Sheet
- Table of Contents
- Abstract
- Program Narrative
  A. Philosophy
  B. Needs assessment
  C. Population(s) Served
  D. Building capacity
  E. Strategic planning
  F. Implementation
  G. Evaluation
  H. Program Management

3 pages
22 page maximum
COVER SHEET REQUIREMENTS
Information on the cover sheet must be completed and signed by both the program submitting an application and the organization submitting the nomination. Please fill-out the blank cover sheet on page 12 in this packet and include it in your application. (An additional cover sheet appears on page 13; photocopies are also acceptable.)

ABSTRACT
A single-spaced abstract not to exceed one page must precede the narrative section of the application. The abstract should provide readers with the following information: “who - provides what - to whom - how - when - where” and the underlying rationale or model for the program’s approach, as well as highlights of the most pertinent findings from the program’s evaluation.

PROGRAM NARRATIVE
Answer every question in the program narrative section using appropriate headings. In the event your program feels it cannot answer the question in full, (e.g.; staff has not completed cultural competency training), explain to the reader what steps your program is taking to address the situation.

A. Philosophy (10 points)
This section should describe the philosophical framework of the program, practice, or strategy. Please include a statement of adherence to a “no illegal or high-risk use” message.

Answer the following questions:
- What is the mission statement of the program, practice or strategy?
- What is the philosophy or conceptual framework on which it is based?
- How does the program’s philosophy reflect a “no illegal or high-risk use” message for alcohol and drugs for ATOD prevention programs?

B. Needs assessment (30 points)
This section describes the steps taken to assess community needs, resources, and readiness to address the problems and gaps in service delivery.

An important feature of this section is the collection and/or synthesis of epidemiological data that includes the magnitude of substance abuse in the community. Include risk and protective factors; community assets and resources; identification of gaps in services and capacity; assessment of readiness to act; identification of priorities; and specification of baseline data against which progress and outcomes can be measured.

Describe the background leading to the program’s development; the gaps or needs the program fills; and how the program integrates philosophy, empirical research, needs assessment, and evaluation data into its ongoing planning. A brief description of relevant prior work, observations, or experiences of the applicant program should be included here. This would be an appropriate section to describe the program’s historical context.

Answer the following questions:
- What epidemiological data and/or other information are available in the community that led to the establishment of this particular program?
- What type of analysis has been conducted to clarify and articulate the scope and nature of the substance abuse problem in the community?
- What are the sound, long- and short-term planning processes that include a needs assessment and reflect a research base?
- What actions were taken to involve representatives of the target population(s) in program planning and implementation to ensure that the program is responsive to their needs?
C. Population(s) served (20 points)
Describe the population(s) to be served by the program in this section. Describe special characteristics of the population and demonstrate that the population served is well defined and understood by the program. This section should address a commitment to cultural sensitivity.

Answer the following questions:

- What target population(s) does the program serve? Describe its norms, values, beliefs, practices, socioeconomic characteristics, risk and resiliency factors, cultural considerations, unique or special needs, and whether the program is community-wide or focuses on a specific population.

- What was done to recruit and retain members of the targeted population into this program?

- How is the staff trained in the cultural patterns of the program’s target population(s)?

- What has been done to ensure cultural competency in this program practice or strategy?

D. Building capacity (30 points)
Describe the mobilization and/or building of capacity to address the needs of your program, practice or strategy. This may involve convening leaders and stakeholders, building coalitions or training community partners.

Provide information on the program and/or agency’s involvement with community coordination and networking efforts, such as collaborative efforts and supportive relationships across agencies and systems.

Answer the following questions:

- How does your program relate to the community’s overall prevention strategy and/or systems?

- How does your program support and make use of collaboration and linkages, especially with Federal, State, or local organizations? Include information on agency/program involvement with the community’s local substance coalition if such an entity exists.

- What community outreach strategies do you employ?

- What type of grassroots participation is included in your program?

E. Strategic planning (30 points)
The strategic plan should articulate the strategies for organizing and implementing the appropriate prevention efforts, and is based - in large part - on the philosophical framework (or mission statement) of the applicant.

A strategic plan is comprised of broad goals and specific objectives that assist in attaining the broader goals. A goal is what the program wants to achieve, objectives are the steps the program will take in order to reach its goal. Outcomes that will be reported should relate back to the program’s goals and objectives.

Answer the following questions:

- What are the goals and objectives of the program?

- How do the goals and objectives directly respond to the information gathered from the needs assessment?

- How many members of the population are expected to be reached and in what timeframe?
F. Implementation (30 points)
In this section, describe the implementation of activities and strategies used by the applicant to accomplish the stated goals and objectives. Program applications must clearly describe their approach, methods, practices, or products used, including the scope, intensity, and duration of their project.
Answer the following questions:

- What makes this program (or practice or policy) innovative?
- What distinguishes this applicant from similar programs, strategies, or practices? Please describe any innovative and unique features that respond to changing community needs, new developments, new population(s) or any other adaptation.
- How does the program operate? Describe in detail and identify all features critical to implementation. Include its scope, intensity, and duration.
- Who is involved in conducting the activities (volunteers, staff, others)?
- How does implementation address the cultural needs of the target population?
- What is the infrastructure/support system used to implement this program?
- Describe the program’s ability to affect community-wide change: At what scale or level is outreach conducted? Does it succeed in changing community norms? Is there adequate capacity to elicit community-wide change?
- What is the number of individuals in the community, and what percent of these individuals were impacted through the implementation of this program, practice or policy?
- What aspects or elements of the program can be replicated or adapted to other sites?

G. Evaluation (30 points)
Provide information on the program’s effectiveness, including verifiable data derived from information on the program’s process and outcome evaluation. The primary question to answer is, “How can I demonstrate the impact this intervention has had on my community?” Evaluation results should be congruent with the program’s stated goals and objectives, and should include quantifiable data.
Answer the following questions:

- What are the major outcomes, impacts, and changes accomplished due to this program?
- What evidence can be used to support the answer described above?
- How do the outcomes relate to the program’s goals and objectives?
- How do the results based from the evaluation meet the needs for which the program was designed?

H. Program Management (20 points)
Describe the organizational structure of the program and how it is managed in the context of the goals and objectives.

Include: 1) an organizational chart for the program, and 2) a budget narrative that specifies sources of income (or support) and expenses.

Answer the following questions:

- What resources are available to the program, and how is the program able to maximize or optimize the resources available to it?
- What systems are in place to help ensure effective communication and coordination among program staff and administration consumers/clients, the media, policymakers and others.
- Include an organizational chart and budget narrative
2010 National Exemplary Awards for Innovative Substance Abuse Prevention Programs, Practices and Policies

APPLICATION COVER SHEET
(INCLUDE WITH APPLICATION)

Has this intervention been submitted for an Exemplary Award in previous years?
_____ YES        _____ NO

What is the primary target for this program, practice or policy? [check one]

_____ INDIVIDUAL
_____ SCHOOL-BASED
_____ FAMILY/PARENT
_____ PEER/GROUP
_____ WORKPLACE
_____ ENVIRONMENTAL/COMMUNITY-BASED
_____ OTHER

If Other, explain:

Program Name

Agency

Contact Person

E-mail

Address

Phone

Fax

I have reviewed the information contained in this application and certify that it is accurate, to the best of my knowledge.

PROGRAM DIRECTOR SIGNATURE __________________________ DATE

Nominating Agency/Organization Information

Agency/Organization

Contact Person

E-mail

Address

Phone

Fax

I have reviewed the information contained in this application and certify that it is accurate, to the best of my knowledge.

NOMINATING AGENCY SIGNATURE __________________________ DATE
Has this intervention been submitted for an Exemplary Award in previous years?
_____ YES    _____ NO

What is the primary target for this program, practice or policy? [check one]

_____ INDIVIDUAL    _____ SCHOOL-BASED    _____ FAMILY/PARENT    _____ PEER/GROUP

_____ WORKPLACE    _____ ENVIRONMENTAL/COMMUNITY-BASED    _____ OTHER

If Other, explain:

Program Name

Agency

Contact Person     E-mail

Address

Phone     Fax

I have reviewed the information contained in this application and certify that it is accurate, to the best of my knowledge.

PROGRAM DIRECTOR SIGNATURE     DATE

NOMINATING AGENCY SIGNATURE     DATE
APPENDIX A: INSTITUTE OF MEDICINE (IOM) TERMS

In 1994, the National Academy of Sciences' Institute of Medicine (IOM) developed a model describing the spectrum of services in the substance abuse field. The spectrum ranges from prevention to treatment to maintenance, and has become a useful model for service providers to match services with need. Within the prevention portion of the spectrum, the IOM has described three (3) domain areas for prevention interventions, universal, selected, and indicated:

**Universal interventions** - These interventions are designed to reach an entire population or large audience. Such interventions or services would be targeted toward people who are not identified to be at special risk of developing a substance dependency. Examples include radio messages or media campaigns.

**Selected interventions** - These interventions target subgroups that may be at risk of using or abusing substances. Examples of “selected” subgroups include children of alcoholics or women of childbearing age.

**Indicated interventions** - These interventions are meant to identify individuals who are experiencing early signs or symptoms of substance use or abuse, but do not yet meet the diagnostic criteria of substance dependency.

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7 Reducing Risks for Mental Disorders. Copyright 1994, National Academy of Sciences, National Academy Press, Washington, D.C.
APPENDIX B: STRATEGIC PREVENTION FRAMEWORK (SPF)

The Strategic Prevention Framework (SPF) is a SAMHSA series of guiding principles that can be operationalized at the Federal, State, and community levels. The SPF is an approach built on community-based risk and protective factors for prevention and is designed to:

- Prevent the onset and reduce the progression of substance abuse, including childhood and underage drinking
- Reduce substance abuse-related problems in communities
- Build prevention capacity and infrastructure at the State and community levels

The SPF is a logical process that entails five (5) related processes:

1- **Conduct a needs assessment** - Develop a profile of community needs, resources, and readiness to address the problems and gaps in service delivery. An important feature of this step is the collection of epidemiological data that includes an assessment of the magnitude of the substance abuse problem in the community, and an assessment of risk and protective factors. In addition, assessments of community assets and resources, identification of gaps in services and capacity, an assessment of readiness to act, an identification of priorities, and specification of baseline data against which progress and outcomes can be measured can be accomplished under this step.

2- **Build capacity** - Mobilize and/or build capacity to address needs. Important parts of this step may include convening leaders and stakeholders; building coalitions; training community stakeholders, coalitions, and providers; and engaging stakeholders to help sustain the activities.

3- **Develop a strategic plan** - Articulate not only a vision for the prevention activities, but also strategies for organizing and implementing prevention efforts. The plan will need to be adjusted as new information comes in, and sustainability should be a constant thought throughout each step of planning and implementation.

4- **Implement evidence-based programs** - The findings of the needs assessments in Step 1 will inform selection and implementation of policies, programs, and practices proven to be effective in research settings and communities.

5- **Evaluate** - This final step involves monitoring progress, and evaluating the effectiveness and improving or replacing those aspects that need to be improved. Ongoing evaluation and monitoring are essential to determine if the outcomes desired are indeed achieved, and to assess program effectiveness and service delivery quality.

Center for Substance Abuse Prevention, Substance Abuse & Mental Health Services Administration.  *Science-Based Prevention Programs and Principles*, 2002, DHHS publication # (SMA) 03-3764.


APPENDIX D: DESCRIPTION OF 2009 AWARD WINNERS

**Intent and Motivation: Alcohol Group Exercise (IMAGE)**

This program, from the University of Houston, bridges the gap between prevention practice and research by connecting behavior theory (research) with appropriate prevention approaches (practice). The IMAGE program increases the motivation to change behavior, specifically focusing on decreasing the frequency and quantity of alcohol use and alcohol-related negative consequences, while increasing the use of self-protective behaviors. Three-year trend data have shown a reduction in selected negative consequences and an increase in abstinence rates, especially among underage students. Campus-wide survey data indicate an increase from 55% to 77% of underage students who report drinking 0 alcoholic drinks in a typical week.

**Families Acting Collaboratively to Educate and Involve Teens (FACE IT)**

This program—developed by the School District of Palm Beach County— is a substance abuse prevention and early intervention program for youth aged 12-18 and their parents or caregivers. Youth are referred to the program as an alternative to suspension, or by local law enforcement agencies as a sanction for an arrest related to a youth’s alcohol or other drug incident in the community. In six years, the program has reduced the recidivism rate for repeat ATOD offenses from 90% to 4%. There has been continuous 100% parent involvement.

**SummerQuest**

The intervention consists of a 12-week intensive prevention program for children whose mothers are engaged in long-term addiction treatment. The intervention takes place during the summer months to participants who range in age from 6-14. The children and their families come from economically disadvantaged areas of Columbus. The ATOD prevention groups were positively correlated with positive behaviors. The program collects both process and outcome data (pre- and post-) through the mothers’ perceptions of family stability and the counselors’ ratings of child engagement in activities. The program is a 2007 recipient of the Center for Substance Abuse Prevention’s Service-to-Science mini-grant.

**Meridian Mayor’s Anti-Drug Coalition (MADC)**

This new coalition has embraced the Strategic Prevention Framework by uniting civic leaders, business owners, educators, law enforcement, treatment providers, churches, and residents with consistent messages and policies regarding ATOD use. Frequency of use declined in 8th, 10th, and 12th graders and perceptions of harm increased significantly.

**Wellness Initiative for Senior Education (WISE)**

This intervention focuses specifically on the overuse and misuse of alcohol and prescription medications by older adults. Lessons within the curriculum include nutrition and exercise, medication use, stress management, depression and substance abuse. Participants were surveyed upon entry, at completion, and 30 days post-completion and demonstrated statistically significant improvements in knowledge, changes in health behavior, and increases in social supports as compared to a control group. The WISE intervention attended a CSAP Service-to-Science Academy in 2006.

**Georgia Underage Drinking Prevention Initiative**

This initiative decreases the onset and decreases the prevalence of underage drinking and its related problems. The intervention utilizes environmental approaches to empower and create change in adults and youth by using a framework consisting of (1) statewide, (2) regional, and (3) targeted community levels—each with its own target population and set of goals, objectives and activities. An independent evaluator has shown that the intervention has made substantial progress towards its goals statewide and in its 10 targeted Georgia counties. Ninety percent of respondents were overwhelmingly satisfied with the trainings provided by the initiative.

**The STEPS Comprehensive Alcohol Screening and Brief Intervention Program**

Developed, implemented, and rigorously evaluated at the University at Albany, State University of New York for the past four years, the STEPS Program is a comprehensive screening and brief intervention (SBI) strategy based on the NIAAA Tier I and NREPP-recognized Brief Alcohol Screening and Intervention for College Students (BASICS) model. The program is designed to (1) reduce alcohol use frequency and quantity, and (2) reduce associated negative consequences. These goals are accomplished by adapting interventions to meet the very distinct and complex needs of three (3) target populations who engage in high-risk drinking: (a) first-year students, (b) student athletes, and (c) students seeking primary health and mental health care on campus.
APPENDIX E: CHECK-LIST

Before sending us your application, use this check-list to make sure we will receive all the required materials. Good luck and thank you for applying.

_____ Application Cover Sheet completed and **signed** by the:
   1) Program Director
   2) Nominating organization or agency

_____ The application in its entirety does not exceed 25 pages.

_____ The application is single-spaced, typed on one side of the page, with 1-inch margins and an 11-12-point font.

_____ All questions under the Program Narrative section are answered or addressed.

_____ Organizational Chart for the program (or practice or policy) and a Budget Narrative.

_____ Somebody proofreads the application for clarity, comprehension, grammar and spelling.

_____ In addition to the original, send us three (3) photocopies of the application, in its entirety and one electronic version to **MAumen@nasadad.org**.

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Mail Applications to:

NASADAD/NPN
1025 Connecticut Avenue, NW Suite 605
Washington, DC 20036
**ATTENTION: Exemplary Awards**

Postmarked by **JUNE 14, 2010**