

**INSTRUCTIONS FOR
APPLICATION CHECKLIST**

Applicants must assemble their applications in the order shown in the Application Checklist. Applications with missing documents, partially completed documents or documents attached out of order may be deemed non-responsive. **Non-responsive applications will be rejected from consideration, and/or may have points withdrawn, at CDPH/MCAH's discretion.**

General Instructions:

Please type or print the official agency name of the organization that is responding to the ASH Ed Request for Application (RFA).

Number the pages of the application in consecutive order in the bottom right-hand corner of each page.

Adhere to the preparation and submission requirements as detailed in Part III, E, Instructions for Preparation and Submission of Applications in the RFA to ensure they are not rejected from consideration and/or have points withdrawn.

All forms requiring a signature must be signed electronically.

Email your application materials as attachments to the ASH Ed email address ASH_ED_RFA@cdph.ca.gov.

"Check" Column:

Use this column to check off each document to ensure all required documents are included in the application and are submitted in order.

"Number of Pages" Column:

Enter the number of pages contained in each document.

Application Checklist

TIME STAMP
Date _____
Time _____
CDPH USE ONLY

Official Agency Name of Organization:

Check	Application Submission Requirements	Number of Pages	Confirmed by CDPH
<input type="checkbox"/>	Application Cover Sheet (Attachment 1)		<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/>	Application Checklist (Attachment 2)		<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/>	CA PREP Program Narrative Template (Attachment 3)		<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/>	I&E Program Narrative Template, if applicable (Attachment 4)		<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/>	Local Stakeholder Coalition Roster (Attachment 5)		<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/>	Budget Templates FY 22-25 (Attachment 6)		<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/>	Local Stakeholder Coalition Member Letters of Support (Attachment 7)		<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/>	Attestation of Compliance Sexual Health Education Accountability Act (Attachment 8)		<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/>	Certification of Indirect Cost Rate Methodology (Attachment 9)		<input type="checkbox"/> Yes <input type="checkbox"/> No

Check	Application Submission Requirements	Number of Pages	Confirmed by CDPH
<input type="checkbox"/>	Organizational Chart (as required in Attachment 3, Question A5)		<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/>	If applicable, Proof of Nonprofit status		<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/>	If applicable, Proof of Corporate status		<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/>	If applicable, applicants who represent a school district must submit proof of tax-free transactions by the IRS		<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/>	Submit one electronic submission containing all application documents on to the ASH Ed email address ASH_ED_RFA@cdph.ca.gov .		<input type="checkbox"/> Yes <input type="checkbox"/> No