

Attachment A - Application Form

**West Virginia Department of Health and Human Resources
 Bureau for Public Health
 Office of Epidemiology Prevention Services (OEPS)
 COVID-19 Vaccination Equity and Prioritizing Populations
 Disproportionately Affected by COVID-19**

Project Title:				
Applicant Organization:				
Contact Person:				
Address of Organization:	Address:			
	City:	State:		Zip:
Telephone (Day):				Fax:
Email:				
County to Be Served:				
Grant Amount Requested:				
WV Oasis #:				
Duns #:				
Please provide a brief description of your project (no more than one or two paragraphs):				
<u>Please Attach: Project Narrative Form, Budget Worksheet, Supporting Documentation (Letters of Support), and Other Supplemental Information You Wish to Include (Graphs, Charts, etc.).</u>				
An applicant's failure to provide complete and accurate information may be considered grounds for disqualification. OEPS may request additional information from applicants, and may accept or reject any or all proposals, in whole or in part.				
Applications must be emailed to BPGrantApplications@wv.gov no later than November 18, 2021, at 5:00 p.m. ET				