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**Healthy Communities Surveillance and Management Project**

**Beta Site Application Process**

**What does my agency need to have in place to start?**

While we are working to continually supplement the research funding and benefits, and to simplify the Toolkit implementation process, there is an agency investment for the chosen Beta Sites – in time, staffing, and a financial investment to help cover some of the costs and to act as a matching element for additional grant funding for the project. You will work directly with a Project Coordinator and team members from the Healthy Communities Research Group (HCRG). You’ll need to provide:

* A **staff person** with the background and authority to be assigned as your “**Healthy Communities Project Manager**” for three years.
	+ This person will need to allocate an average of approximately 5-20 hours per month (approx. .25 FTE for Year One). They will be trained throughout the process, with a focus on assessment, partnership facilitation, setting desired outcomes, and future implementation strategies.
* **The agency will need to invest $25,000 to $100,000** (depending on size and complexity) in annual financial support via a contract to partially offset the project costs. We strongly encourage a **three year commitment** to insure your community realizes the full benefit of the affiliation and documented impact.
* **Basic inventory and assessment reports** **and materials**\*
	+ Gathering of materials that outline your agencies policies, laws, and procedures as currently adopted
	+ A basic composite-values method (CVM) digital inventory and GIS of your agency’s assets that are affecting the target age group
	+ Programming reports to complete the Affordances Inventory Template
	+ Financial reports to help assess the allocation of resources going to these activities.
* Buy-In from your community’s leadership and decision-makers to commit to undertake this process with the HCRG.

*\*NOTE: if your agency does not have these items easily available, the HCRG can recommend separate trainings and/or consulting services to help you gather and create the basic levels needed for the Healthy Communities Toolkit work.*

**Apply to Become a 2013 “Beta Site” now!**

Contact: Teresa Penbrooke, MAOM, CPRE, Director

**GP RED Healthy Communities Research Group**

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**Initial Beta Site Application / Information Form**

**Community Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What type of agency are you? (Parks and Recreation / Public Health / Non-Profit, etc.)

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Type of Jurisdiction:

* Municipality
* County
* State
* Special District
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Population of Jurisdiction Service Area to be included? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have a complete and current Composite-Values Methodology (CVM) Digital Inventory and Level of Service Analysis for your assets?

 Yes \_\_\_\_ (If so, year completed \_\_\_\_\_\_) No \_\_\_\_ Don’t Know \_\_\_\_

Has your agency completed youth specific surveying in the last five years? Yes \_\_\_ No \_\_\_

Has your agency participated in similar programs or initiatives in the last ten years?

Yes \_\_\_ No \_\_\_ If so, which ones? (Please describe) \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Do you have any identified partners who will be working with you: Yes \_\_\_ No \_\_\_

If so, please list partner names: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is your time frame for starting? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Anything else to tell us right now? Questions? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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We will be in touch with you shortly on how to move forward.

**Agency Contact**: Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_