**Attachment B**

**Illinois Department of Human Services**

**APPLICATION CONTENT CHECKLIST**

**Name of RFA: Awards of Excellence Support Services**

**Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

The application should contain the following in this order:

🞎 Applicant Cover Sheet

🞎 This APPLICATION CONTENT CHECKLIST

🞎 Executive Summary

🞎 Organization Qualifications/Organizational Capacity

🞎 Application

 🞎 Purpose of Funding

 🞎 Target Population

 🞎 Community Outreach and Collaboration

 🞎 Evaluation and Monitoring

 🞎 Budget Forms and Budget Justification

🞎 Appendix A: Resumes

🞎 Applicant’s Executive Director

🞎 Program or Project Director

🞎 Appendix B: Job Descriptions

🞎 Program Director

🞎 Other Grant Funded Employees

🞎 Appendix C: Organizational Chart

🞎 Appendix D: Letters of Reference (3) from Organizations for Whom Similar Services Have Been Provided

🞎 Appendix E: Letters of Agreement/Support from Collaborating Agencies/organizations (if applicable), if not applicable please leave blank

🞎 Appendix F: Most recent audited financial statements

🞎 Appendix G: Board of Directors list (if applicable), if not applicable please state

🞎 Appendix H: Tax-exemption documentation (if applicable), if not applicable, please state