



# Reaching Rural Individual Application

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### Applicant Information\*

First Name\*: \_\_\_\_\_

Last Name\*: \_\_\_\_\_

Job Title\*: \_\_\_\_\_

Office/Agency\*: \_\_\_\_\_

Phone Number\*: \_\_\_\_\_

Email Address\*: \_\_\_\_\_

### Applicant Employer Information\*

Applicant Agency/Organization Legal Name\*: \_\_\_\_\_

Street Address\*: \_\_\_\_\_

City or County\*: \_\_\_\_\_

State\*: \_\_\_\_\_

Employer Identification Number\*: \_\_\_\_\_

### Type of Applicant\*

County agency or entity

City or township agency or entity

Tribal entity

Nonprofit agency

For-profit agency (\*\*Applicants who work for a for-profit company will be considered on a case-by-case basis and require letters of support from the local governments or tribal entities that they work closely with in their current roles.)

Other - Write In (Required): \_\_\_\_\_ \*

What is the geographic location served by your agency?\*

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What is the population size of the community/communities to be served by this project\*:

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**Is the community of focus for this application considered rural as defined by the [Rural Health Grants Eligibility Analyzer](#)?\***

Yes

No

**If not, provide justification for why you believe your jurisdiction is rural.\***

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## **Essay Questions**

**What is your professional role in the community, and how does substance use impact your role?\***

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**What opportunities exist for you to improve your community's response to substance use?\***

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**What strengths exist in your community that you can draw upon over the course of the project to support this planning initiative?\***

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**What strengths do you possess that you hope to draw upon during this initiative?\***

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**What interests you about this initiative and why is this a good time in your career to pursue this opportunity?\***

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### **Letter of Support**

If you are not an elected official, judge, or agency/department director, you must submit a letter from your agency director indicating their support for your engagement in this project.

If you work for a for-profit entity, you must submit a letter of support of support from the local government or tribal entity that they work closely with in their current roles.

Attach a copy of the scanned, signed letter(s) below.

**Attach File\***

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