

Application Form

To apply for the 2023 cohort of Power-building Partnerships for Health (PPH) fill out this Application Form and email the completed form with all attachments to PPH@humanimpact.org

Partnership Information

Location of Partnership:
Topic/Issue the partnership is working on:

Local Health Department

Name:
Website:

Community Power-Building Organization

Name:
Website:

Participant Information

Please provide information for 6-8 people (3-4 per organization) that are applying to participate in the 2023 PPH cohort. For each participant, include an email, self-identified demographics and the person's role or position within the organization. The first person listed for each will be considered the primary contact person.

Local Health Department

Name:
Email:
Identities:
Role/Position:

Community Power-Building Organization

Name:
Email:
Identities:
Role/Position:

Name:
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Identities:
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Attachments

- Joint expression of interest on behalf of your partnership.** This can be a letter, an audio recording, or a video – whichever works best for your partnership. We encourage you to keep it brief: 2-5 pages written or 3-5 minutes recorded. It should include:
 - a. Describe the partnership between the health department and community power-building organization: what is your relationship and how have you worked together in the past?
 - b. What do you want to accomplish together? What upstream or root cause issue(s) are you focused on, what challenges are you facing, and what actions, changes, or policies do you want to create?
 - c. Why are you interested in Power-building Partnerships for Health? What do you want to get from participating in the 2023 PPH cohort?

- Local health department (LHD) attachments**
 - LHD Organizational Chart
 - LHD Participation Agreement - *copy and use [this template](#)*
 - health equity work example(s) - *please share at least one (1) and up to five (5) existing documents that show the health department's equity work (e.g. publications, CHA or CHIP reports, statements, media articles, strategic plan). Attach file(s) or list link(s) here:*

- Community power-building organization (CPBO) attachments**
 - CPBO 501c3 determination letter or letter documenting fiscal sponsorship
 - CPBO Participation Agreement - *copy and use [this template](#)*
 - organizing work example(s) - *please share at least one (1) and up to five (5) existing documents about your organizing, campaigns, membership, history or participation in local, regional or national grassroots organizing networks. Attach file(s) or list link(s) here:*

One last step!

- Finally, fill out the [Landscape Assessment Survey](#). HIP is conducting a national landscape assessment of health departments collaborating with community organizers to lift up stories of collaboration. All applicants for PPH should be included on this map!