ACTION ALLIANCE PROPOSAL OUTLINE

Date_________

1. Proposal Title:__________________________________________________________

2. Your name and Title:

3. Clearly state the specific aims of this proposal: What problem(s) will it address?

4. Who will benefit?

5. Has this project been undertaken before in this county or elsewhere?

6. Provide background information, rationale, data, etc. to demonstrate the need for this project.

7. What is your time frame for getting organized?

8. State anticipated outcomes.

9. Will this project require approval from other organizations/agencies/advisories?

   If so, please identify:

10. Who will assist you? Provide names of proposed study group, committee, etc.

11. What will you need from the Action Alliance? Other needs?

12. What is your proposed budget?