

# COMMUNITY SUPPORT REQUEST FORM

**STEP ONE:** Contact WFLI Program Manager [ejohnson@wfli.org](mailto:ejohnson@wfli.org) or Coordinator [sguerney@wfli.org](mailto:sguerney@wfli.org) to discuss overall project.

**STEP TWO:** Follow Step One with a formal request to the First Lady via web site [www.wfli.org](http://www.wfli.org) If confirmed advance to STEP THREE.

**STEP THREE:** Provide answers to the following items:

**TYPE OF ACTIVITY :**

WFLI Town Hall Meeting  Other (please describe briefly)

**INTENDED AUDIENCE:** (If a Town Hall Meeting there must be representation from each of the following)

- |  |   |
|--|---|
| <input type="checkbox"/> Elected Officials           | <input type="checkbox"/> Municipal Leaders            |
| <input type="checkbox"/> School Administrators       | <input type="checkbox"/> Educators                    |
| <input type="checkbox"/> Parents                     | <input type="checkbox"/> Students                     |
| <input type="checkbox"/> Judges                      | <input type="checkbox"/> School Resources Officer (s) |
| <input type="checkbox"/> Chief of Police             | <input type="checkbox"/> Sheriff                      |
| <input type="checkbox"/> SA Treatment Professionals  | <input type="checkbox"/> Faith Community              |
| <input type="checkbox"/> SA Prevention Professionals | <input type="checkbox"/> Prevention Coalition Members |
| <input type="checkbox"/> Other _____                 |   |

**TOTAL NUMBER OF PARTICIPANTS ANTICIPATED** \_\_\_\_\_

**LOCATION OF EVENT** \_\_\_\_\_

**IDENTIFY AREAS FOR REQUESTED FUNDS AND AMOUNTS FOR EACH:**

- |  |  |
|--|--|
| <input type="checkbox"/> Food & Beverage _____ | <input type="checkbox"/> Meeting Space _____ |
| <input type="checkbox"/> Speaker Fees _____    |  |
| <input type="checkbox"/> Invitations _____     | <input type="checkbox"/> Printing _____      |
| <input type="checkbox"/> Awards _____          | <input type="checkbox"/> Other _____         |

**ADVERTISING:** (please describe any unique plans - others may be able to use your suggestions)

Newspaper  Radio  TV  Flyers  Posters  Banners  Other (describe)

**“Call to Action” - INTENDED OUTCOME:** (refer to IOM/NAS report recommendations for examples)

**OTHER COMMENTS:**

For Office Use Only:  
Date Processed \_\_\_\_\_

Approved/Denied

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_