



2023 Review Cycle – Re-recognition Applicant Intent to Apply Form

Dear Applicant:

The purpose of this Intent to Apply form is to notify NACCHO that you will be applying for the **2023 Project Public Health Ready (PPHR) recognition cycle**. Please be sure to check the [PPHR webpage](#) for additional resources and the deadlines associated with this recognition cycle.

To better facilitate and coordinate the PPHR implementation and review process, applicants are required to complete and submit this Intent to Apply form to PPHR@naccho.org. To confirm participation in the 2023 Review Cycle, applicants are required to submit Part 1 of their application fee (\$1,250). Applicants may opt to pay their application fee (\$2,500) in full.

Application fees can be paid online via credit card at [MyNACCHO](#). Applicants may also pay via check. If paying by check, please mail this completed form with check made payable to NACCHO to: **Project Public Health Ready, NACCHO Lockbox Processing, PO Box 79197, Baltimore, MD 21279-0197**.

This Intent to Apply form and Part 1 payment are due by **Friday, October 28, 2022**.

PPHR Applicant Responsibilities

- Work with the state lead to develop a PPHR application using Version 5.0 of the PPHR Re-recognition Criteria.
- Submit technical assistance questions to NACCHO through the state lead as they arise throughout the development of the PPHR application.
- Participate in monthly teleconference calls with other applicants from the same state, if applicable.
- Participate in an in-state technical review of the PPHR application no less than three months before the application due date.
- Submit a complete application in a PPHR-approved format electronically to NACCHO by **Wednesday, August 31, 2023, 5:00pm Eastern Time**.

By signing below, I state my agency’s intent to apply for PPHR recognition in the 2023 review cycle and confirm that I understand the applicant responsibilities listed above. A non-refundable \$1,250 fee (Part 1) will be paid on behalf of the agency listed below with the submission of this form. I understand that Part 2 of the application fee (\$1,250) and a completed Application Signature form are required by **August 31, 2023**, for NACCHO to review my agency’s application.

I understand that payment of this fee does not guarantee PPHR Re-recognition.

_____ Agency Name

_____ Applicant Lead Name

_____ Applicant Lead Signature

_____ Date

_____ Agency Director

_____ Agency Director Signature

_____ Date

_____ State Lead Name (If applicable)

_____ State Lead Signature (If applicable)

_____ Date