**SUMMIT ENDOWMENT**

**2023 HEALTHY PEOPLE 2030 PRIOriTY**

**APPLICATION CHECKLIST**

**Accelerating Community Impact (ACI)**

**APPLICATION REQUIREMENTS**

Complete and submit the following documents via email to aspottswood2@wellspan.org using the formats provided:

❒ Cover Sheet

❒ Program Narrative

❒ Budget Narrative Form

❒ Budget Worksheet

❒ Most recent IRS Form 990

❒ 501(c)(3) tax determination letter from the Internal Revenue Service, if not

 previously submitted

❒ Letter from each collaborating organization outlining the responsibilities it is
 assuming for the program

**Completed applications must be submitted electronically to the Summit Endowment Office.**

**FOR QUESTIONS OR MORE INFORMATION, PLEASE CONTACT:**

Ann Spottswood

Director of Community Services, WellSpan Health.

(717) 267-4861

**aspottswood2@wellspan.org**