

Attachment XIII: Application Checklist
Funding Opportunity Announcement (FOA) PS12-1201: Comprehensive HIV
Prevention Programs for Health Departments

The following items should be submitted with the application:

1. Table of Contents
2. Cover Letter
3. Application Form (with DUNS number included)
4. Project Abstract (one condensed abstract that address each requested category)
5. Project Narrative (as outlined in the FOA for each requested category)
6. City/State Letter of Agreement
7. Jurisdiction HIV/AIDS Epidemiology Profile (if available)
8. Management Plan (for each requested category)
 - Curriculum Vitae or resume
9. Budget and Budget Justification (for each requested category)
 - Detailed line item budget
 - Budget justification
 - Standard form 424A
10. CDC Form 0.1113 Assurance of Compliance
(Located at <http://www.cdc.gov/od/pgo/forms/hivpanel.htm>)

The following items should be submitted within six-month after initial funding:

1. Jurisdictional HIV Prevention Plan
2. Prevention Planning Group (PPG) Engagement Plan
3. Letter of Concurrence
4. Capacity Building Needs Assessment (if applicable)
5. Comprehensive Program Plan
6. Data Security and Confidentiality
 - Assurance of Confidentiality – Covers the full period of funding
 - Memorandum of Understanding – CPEMS System Administrator
 - Memorandum of Understanding – Non-CPEMS System Administrator
7. Rules of Behavior for Data Systems
 - CPEMS System Administrator
 - Non-CPEMS System Administrator
 - CPEMS Users
 - Non-CPEMS Users

The following items should be submitted annually

1. Rules of Behavior for Data Systems
 - CPEMS System Administrator
 - Non-CPEMS System Administrator
 - CPEMS Users
 - Non-CPEMS Users
2. Completed Syringe Services Programs (SSPs) Annual Certification Statement