

## OMB Approval Number 2539-0015 (exp 1/31/2006)

## Sample Worksheet 3 - Grant Partners

Partner Name	Type of Organization or Program	Description of Commitment	Proposed Activities To Be Conducted by Partner	Resource and Match Commitment (\$ Value for Services Provided)

**Partner Name:** Name of organization or entity that will partner with applicant in conducting LHC activities.

**Type of Organization or Program:** Health, Housing, Environmental, Community Development Department, Grassroots Faith-Based or Other Community-Based Organization, Childhood Lead Poisoning Prevention Program, Financial Institutions, Job Training, and Economic Opportunity Organizations, etc.

**Description of Commitment:** Memorandum of Understanding/Agreement, Contract, Sub-grant, Letter, etc.

**Proposed Activities to be Conducted by Partner:** The type of activities that will be conducted by the grant partner in support of LHC efforts (i.e. rehabilitation, testing, training, education and outreach, specification writing, relocation, etc.)

**Resource and Match Commitment Contributed by Partner:** The value of any contributed resource by the grant partner (includes in-kind or cash in support of the grant program).