



# SAMHSA'S PROGRAM TO ACHIEVE WELLNESS

## *Incorporating Wellness Into Recovery*

### Application Cover Sheet

Thank you for applying for SAMHSA's Program to Achieve Wellness Recognition of Excellence in Wellness. In addition to submitting a brief narrative, applicants are required to complete and submit this cover sheet. If you have any questions or concerns about the application process, please contact [cbrandow@prainc.com](mailto:cbrandow@prainc.com).

#### Applicant Details

Name: *First*

*Last*

Email Address:

Phone Number:

Organization:

Job Title:

Street Address: *Line 1*

*Line 2*

City:

State:

Zip:

## Organization Information

How do you categorize your organization?

Faith-Based Organization

Educational Institution

For-Profit Organization

Hospital or Health Center

Local Government Agency

National Organization

Nonprofit/Community-Based  
Organization

State Government Agency

Tribal Entity

Other:

What target population does your organization serve?

How many individuals are served by your organization each year?

What is the annual operating budget for your organization?

## Wellness Program Details

Wellness Program Name (if applicable):

How long has this program been operating at your organization?

What is the annual operating budget for this program?

How many individuals are served by this program each year?

Have consumers and their support systems been involved in the planning, implementation, or evaluation of this program? If so, how? Please refer to judging criteria in the solicitation.

Briefly list the main goals of this program.

Does your organization track outcomes for this program? If so, how?

Briefly list the main outcomes of this program.

What makes this program innovative?