

**State Health Improvement Plan (SHIP) Video Challenge
One-Time Discretionary Grant for SHIP Alignment and Implementation
Scope of Work**

Applicant Instructions

Use this form as a substitute for Section 7 on the general grant application. Fill out the form below as completely as possible and submit it with your completed general grant application along with a letter of support, if applicable. Applications are due by May 6, 2014, and must be submitted electronically to dph.shipicc@illinois.gov.

I. Video Challenge

a. Which State Health Improvement Plan (SHIP) Video Challenge topic does your video address?

- What's Your SHIP Story?**
- We're a Public Health Stakeholder.**
- What's Your SHIP Priority?**

b. Provide a short description of your video:

c. Provide a shareable link to your video posted on YouTube or Vimeo (required). Note that IDPH may use ALL submitted videos as part of their SHIP outreach activities.

d. Do you have signed consent forms for everyone appearing in your video?

- Yes** **No**

(Note: Applicants that cannot provide copies of signed consent forms are disqualified from consideration.)

d. Do you have signed consent forms for everyone featured in your video?

Yes No

(Note: Applicants that cannot provide copies of signed consent forms are disqualified from consideration.)

e. Does your video consist *primarily* of new, original work?

Yes No

(Note: As noted in the RFA, videos submitted should consist primarily of new, original content, created specifically for this grant application. However, your video may include previously existing photos, video clips, audio clips, or other assets used to illustrate or provide context for the work. Remember that you will need signed consent forms for everyone featured in your video, whether in new or previously created footage.)

II. Proposal for use of Award Funds

Please provide a detailed narrative outlining how you or your partner organization will use the \$1,500.00 grant award in furtherance of SHIP alignment or implementation.

FOR INDIVIDUAL APPLICANTS ONLY:

III.

a. Do you have a letter of support from the organization to which you intend to make grant funds available?

Yes **No**

Include your letter with your e-mailed application. (Note: Applicants that cannot provide a letter of support from a relevant community organization are disqualified from consideration.)

b. Are you at least 13 years old?

Yes **No**

We are unable to accept entries from individuals younger than 13 years of age.