

FIREFIGHTER BEHAVIORAL HEALTH ALLIANCE & WEYERHAEUSER 2022-2023 GRANT APPLICATION FOR WILDLAND FIRE DEPARTMENTS

ORGANIZATION CONTACT INFORMATION

Name		
Title/Rank		
Phone Fax		
E-mail		

ORGANIZATION INFORMATION

Name of Organization			
Address			
City, State, Zip Code			
Phone			
Fax			
Website			
Type of members	Career	Combination	Volunteer/POC
Number of Members on Dept	FT	PT	Volunteer/POC

PROGRAM REQUEST

Program Provided Please select	Saving Those Who Save Others – 2hr VIRTUAL Workshop OR Internal Size Up – 2hr VIRTUAL Workshop	<input type="checkbox"/>	
Anticipated Date of Workshop	Month	Day	Date
Are you open to offering this workshop to nearby departments?			
Will you actively promote attendance for this workshop?			
Are you a Wildland Fire Department?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Have you ever received a grant from FBHA or Weyerhaeuser?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Please provide an explanation of your organization's need for the grant:

AGREEMENT

1. All information disclosed in this document will be kept confidential.
2. FBHA is funding the grants through a generous donation from Weyerhaeuser.
3. By submitting this application, you certify that the information is correct. You agree to abide by the requirements listed below:
 - Class should have a minimum of 25 attendees, unless approved otherwise.
 - If your department wants additional training, the department is responsible for the costs of additional workshops, consulting, etc. and any expenses for extending the engagement.
4. By submitting this application, you authorize FIREFIGHTER BEHAVIORAL HEALTH ALLIANCE to review this application and its contents to determine need.

SIGNATURES

Authorized Signature

Printed Signature

Title

Date