



Let's Go 3.0 Sample Application

1. Contact Person Information
 - a. First Name
 - b. Last Name
 - c. Phone Number
 - d. Email Address
 - e. If you are applying on behalf of a community coalition or organization, please list them here.
 - f. Zip code of community served through this project

2. Project Title

3. Which topic(s) does this project address?
 - a. Open Community Use
 - b. Complete Streets
 - c. Community Gardens
 - d. Farmers' Markets
 - e. Active Community Environments
 - f. Healthy Vending
 - g. Comprehensive Planning
 - h. Bike and Pedestrian Planning
 - i. Healthy Retail
 - j. Healthy Corner Stores
 - k. Worksite Wellness
 - l. Healthy Faith-Based Initiatives
 - m. School-based initiatives
 - n. youth engagement
 - o. Other (leave blank space)

4. Project overview/description.

5. Provide a description of the population served through this project.

6. How will you know that this project is successful? Provide up to 5 success indicators.
(Success Indicators: data your organization will gather and use to measure success and impact)

7. What are the key milestones in this project? (up to 5) (Key Milestones: key actions or events that mark progress throughout the project)

Project milestone	Description	Expected Timeline
<i>Example:</i> Purchase materials for community garden	The coalition plans to use approximately \$500 to purchase materials for 3 gardens.	October 1

8. How does this project support a policy, systems, or environmental change?
9. Does this project increase coalition capacity by leveraging funds or engaging new partnerships?
- a. If yes, describe how. Please include any new partnerships and funds leveraged, if applicable.
10. Does this project address health equity in your community?
- a. If yes, please explain how, including how you are partnering with the population served in this project. Please include relevant statistics, if available.
11. Is there a local health coalition in your county? (The coalition does not have to be a chapter of Eat Smart Move More South Carolina.)
- a. If yes, are you collaborating with them on this project? Please describe this partnership if applicable.
12. Please attach the following REQUIRED documents below:
- a. 501(c)3 documentation, and
 - b. project budget.