2027 College Well-Being Award
American College Health Foundation

APPLICANT INFORMATION

https://www.acha.org/ACHF

Title of Project:

Total Funds Requested (not to exceed $3500): $

Applicant:

Name:

ACHA Membership #:

Position Title:

College/University:

Address:

Work Telephone: _____ Cell: _____

E-Mail Address:

College/University Demographics:

Student Population:

Undergraduate:_____ Graduate:_____

Racial/Ethnic Composition % (Undergraduate):

Racial/Ethnic Composition % (Graduate Students):

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Student Health Center Authorizing Agent:

Name: _____

Title: _____

College/University: _____

Address: _____

Telephone: _____

E-Mail Address: _____

Post Project Requirements

The recipient shall submit an interim report 6 months after funding is received. A final report is requested upon completion of the project. In addition, an abstract describing the results of the project will be submitted to the American College Health Foundation (ACHF). Copies of the abstract may be made available to American College Health Association (ACHA) members during the ACHA annual meetings or in ACHA/ACHF publications, including the ACHF website to demonstrate the effectiveness of the award's objective. Recipients may also be requested to make a presentation at a future ACHA conference (state, regional, national) and write an article for publication in college health-related periodicals discussing project outcomes. This requirement can also be fulfilled by being interviewed or writing an article for ACHF's Impact Newsletter. Please include a photo of your project, project group, students interacting with the project, or a headshot of the Project Director at the school which ACHF may use on the website and newsletter.

APPLICANT

I agree to accept responsibility for the implementation of the proposed project and to provide the post-project requirements as outlined if the project proposal is awarded as a result of this application.

SIGNATURE _____ DATE_____

Project Director's Supervisor or other Authorizing Agent:

I endorse the proposed project and accept responsibility to monitor project progress and completion of post project requirements. ***Please submit this signature using the separate form.***