HEALTH IMPROVEMENT PARTNERSHIP OF MARICOPA COUNTY
www.hipmc.org

Maricopa County Department of Public Health would like to hear about other projects taking place in the broader community that contribute to the 2012-2017 Community Health Improvement Plan.

Please identify a project that you are currently working on that may contribute to one or more of our current health priorities:
Obesity, Diabetes, Cardiovascular Disease, Lung Cancer and Access to Care.

Your Name:

Organization:

Describe Nature of the Project:

Please check which health priorities can be impacted by these efforts (Check all that apply).

☐ Obesity ☐ Diabetes ☐ Cardiovascular Disease ☐ Lung Cancer ☐ Access to Care

Is this a collaborative project with another organization? ◯ Yes ◯ No

If so, please list all organizations that are contributing to this initiative:

Would you like to be contacted regarding any technical assistance that Maricopa County Public Health might be able to offer your project/initiative at this time?

◯ Yes ◯ No

Submit by Email

** You may need to save your completed PDF to your own computer and email it to hipmc@mail.maricopa.gov as an attachment*

Print Form

For any questions regarding the completion of this form, please email hipmc@mail.maricopa.gov