

Community Engagement Reimbursement Request Form

Local Implementing Agency

Community Action Plan Community/ies

Community Action Plan Strategy and Description of Planned Community Engagement

Spectrum of Public Participation



Consult (e.g. focus group, needs assessment, qualitative interview)



Involve (community has a voice in the process and will influence decision-making)



Collaborate (e.g. ongoing advisory board/group)

Format of the Community Engagement Activity



In-person



Virtual



Hybrid

Reimbursement Information

Are you planning to reimburse for participants' incurred costs (e.g. childcare, transportation, internet)?

Yes

No (reimbursement will not be approved)

Please complete the table below.

Number of community members	
Time per session (hours)	
Number of sessions	
Reimbursement per session	
Total expenditure (# of community members x # of sessions x reimbursement per session)	

Form of payment:

Gift card

Check or e-Check

Other (describe below)

Gift cards may not be issued in amounts greater than \$25 per gift card. When reasonable, gift cards should have restrictions on what they may be used to purchase. See FY24 AZ Health Zone Guidance & Policy Manual.

Budget Information

The expense above is already included in the agency budget.

Yes

No, funds will be moved from

Complete this form and submit to azhealthzone@azdhs.gov. Please include any relevant attachments, such as a focus group advertisement/flyer, reimbursement agreement, etc.