



Florida Heart Health Plus Learning Collaborative Social Service Organization Commitment Form

If you are interested in participating in the Heart Health Plus Learning Collaborative, please complete and return the form to JoinHealthARCH@ucf.edu or fax to 407-636-5142

Organization Name:					
Organization Address:					
City:		County:		Zip:	
Primary Contact:				Title:	
Email:			Phone:		
Total # of staff:					
Number of locations:		Number of Clients served:			

Please select the type of services your organization provides (select as many as apply):

☐ Transportation	☐ Food pantry/delivery	☐ Medical Services	☐ Vocational Training
☐ Housing	☐ Rx Assistance	☐ Heart Health Plus	☐ 2-1-1
☐ Translation	☐ Other: _____		

Name: _____

Signature: _____ Date: _____

Title: _____

This project is supported by the DP23-0004 The National Cardiovascular Health Program Cooperative Agreement number NU58DP007457, funded by the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention or the Department of Health and Human Services.