

Attachment C

Application Checklist

1. Written proposal (maximum 15 pgs)	<input type="checkbox"/>
2. Attachment I – Organizational Chart	<input type="checkbox"/>
3. Attachment II – Proposed Staffing Matrix	<input type="checkbox"/>
4. Attachment II – Psychiatric Resource Capacity	<input type="checkbox"/>
5. Attachment IV – Medicaid Certification Letter	<input type="checkbox"/>
6. Attachment V – Accreditation Letter	<input type="checkbox"/>
7. Attachment VI – Statement on Legal Relationship with Hospital	<input type="checkbox"/>
8. Attachment VII – Training Plan	<input type="checkbox"/>
9. Attachment VIII – Certified Cost Report	<input type="checkbox"/>
10. Attachment IX – Current Agency Balance Sheet	<input type="checkbox"/>
11. Attachment X – Letter of Support	<input type="checkbox"/>