

**INSTRUCTIONS FOR
LOCAL PARTNER COALITION MEMBER LETTERS OF SUPPORT**

Three (3) letters of support are required from local partners. Letters of support are required from: one or more local Family PACT provider; the Local Maternal, Child, and Adolescent Health Director or public health designee in the county where the applicant proposes to provide services; and a representative from a potential CA PREP service delivery site that serves the applicant's target population(s).

The letter must be on the partner's official letterhead and must include all of the following:

- The date the letter is signed.
- The name of the organization being represented on the coalition.
- The name and title of the representative attending coalition meetings.
- The mailing address and physical address (if different from mailing) of the organization.
- The telephone number and email address of the representative attending coalition meetings.
- The letter of support must be signed in blue ink and the printed/typed name and title of the coalition member must be included below the signature.

The following content should be addressed briefly in the body of the letter of commitment:

- The partner's experience working with adolescents within the county.
- The partner's experience supporting comprehensive sexual health education.
- How long the partner has been connected with the applicant and in what capacity.
- How the partner will support the proposed plan in the ASH Ed application.
- How the partner will contribute to the improvement of adolescent sexual and reproductive health within the community.

Note: Please include the following statement in the closing paragraph:

I, (Local Partner Coalition member's name), am submitting this letter to demonstrate (partner organization)'s ongoing commitment to, and support of, the ASH Ed sexual health education efforts of (applicant organization).