

PREVENTION WORK PLAN SUBMISSION AND APPROVAL VERIFICATION: FY 2023-24

AGENCY _____ **PROVIDER ID** _____
CONTRACT TYPE _____ **CONTRACT #** _____

Once approved by the County, the *SUPS Work Plan FY 2023-24* document will become part of the Contractor’s Substance Use Prevention Services (SUPS) Community Collaboration Program (CCP), Prevention Education Program (PEP), and other special projects. This will be used by designated Department of Public Health, Substance Abuse Prevention and Control (SAPC) staff to determine contract compliance. Contractors are ultimately responsible for completing the Activities and Tasks as outlined in the *SUPS Work Plan FY 2023-24* document.

By signing below, the Contractor acknowledges statements above and verifies that *SUPS Work Plan FY 2023-24* document accurately represent the full scope of services to be provided under the SUPS CCP, SUPS PEP, or special project contracts within FY 2023-24.

Executive Director’s Printed Name: _____

Executive Director’s Signature: _____ **Date** _____

Program Director’s Printed Name: _____

Program Director’s Signature: _____ **Date** _____

<u>FOR SAPC USE ONLY</u>						
Date Received:		Date Approved:				
PPS Name:		Signature:				
Director Name:		Signature:				
Date Copy Placed In Contractor’s SAPC Master File:						
Date Copy Provided to Contractor’s Contract Program Auditor:						
Status of Required Revisions:		Feedback Provided				
		Revision Received				

