

Attachment C – Applicant Profile



Government of the District of Columbia
Department of Behavioral Health (DBH)
District of Columbia Opioid Response (DCOR) Grant Opportunity: Community
Outreach and Improving Patient Engagement and Whole Person Care at Opioid
Treatment Programs (OTPs)
RFA RM0 OTOP062725
Applicant Profile

Applicant Name: _____

Type of Organization: Non-Profit Commercial (For-Profit)
 Religious

EIN/Federal Tax ID No.: _____

UEI No.: _____

Primary Contact Person/Title: _____

Email/Phone Number: _____

Fiscal Contact Person/Title: _____

Email/Phone Number: _____

Street Address: _____

City, State ZIP: _____

Telephone: _____

Email: _____

Serving Ward(s): _____

Organization Website: _____

**Name of Authorized Representative
(Official Signatory):** _____

Title: _____

Email/Phone Number: _____

**Signature of Authorized
Representative:** _____

Please complete RFA Abstract on next page

RFA Abstract (Required, Limit One Page)