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| **Materials Review Form**  Approval of Materials Developed for Public Distribution | | | | | | | |
| **Agency Name** |  | | | **Contract Type** | | |  |
| **Contact Name** |  | | **E-mail** | |  | | |
| **Submission Date** |  | **Requested Distribution Date** | | | |  | |
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| **Type of Material:** | | | | | | | |
|  | Brochure | | |  | Press Release |  | PowerPoint Presentation |
|  | Newspaper Article | | |  | PSA or Video Clip |  | Posters |
|  | Policy/Ordinance | | |  | Social Media Posting |  | Survey Tool**\*** |
|  | Other | [insert description] | | | | | |
| \* **If a survey tool is being submitted for review, please complete the *Supplemental Questionnaire for Survey Tool Review* below.** | | | | | | | |
| **SAPC Short-Term Objective** | | | [Select County Goal and Objective] | | | | |
| **Provider Short-Term Objective** | | |  | | | | |
| **Briefly describe the purpose of the material(s) and how it will be used to impact the provider short-term objective:** | | |  | | | | |

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| By signing below, you are indicating that the attached document(s) follows all agency policies and procedures and comply with the *General Review Criteria* outlined in SAPC’s *Approval of Materials Developed for Public Distribution* procedure. | | | |
| **Signature Program Director** |  | **Date** |  |

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| **Approval Notification – For SAPC Use Only** | | | |
| **Signature Prevention Director** |  | **Date** |  |
| **Signature Research Staff**  **(if related to research/ evaluation)** |  | **Date** |  |
| **Signature Prevention Staff** |  | **Date** |  |

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| **Additional Requirements for Approval:** | | |
| Approval of Materials Developed for Public Distribution – Materials Review Form | | Revised 05/01/2019 |
|  | | |
| **Supplemental Questionnaire for Survey Tool Review** | | |
| 1. **Briefly describe the population you are targeting for completion of this survey:** |  | |
| 1. **How/where will you be recruiting participants to complete your survey?** |  | |
| 1. **Will you be providing incentives for the completion of this survey? If so, please describe the amount and type.** |  | |
| 1. **What will you do with the information collected through this survey?** |  | |