



COLORADO

Department of Health Care
Policy & Financing

COLORADO DENTAL HEALTH CARE PROGRAM FOR LOW-INCOME SENIORS

GRANT PROPOSALS CHECKLIST

A proposal that is missing any of the items listed below will be considered incomplete. A complete proposal will contain the following documents in the order listed below:

- Transmittal letter;
- Table of Contents;
- Request for Grant Proposal Response;
- Appendices A. – C.; and
- Appendix D (Optional)

Proposals should not exceed 15 pages (the page limit does not include the transmittal letter, table of contents or appendices), double-spaced, with 1-inch margin and a font of 12 point.

Proposals shall be submitted via email and should be submitted as a PDF file or Microsoft Word document. One electronic file is preferred, but a separate file(s) for the transmittal letter and/or appendices is acceptable.

Email the proposal to: chandra.vital@state.co.us