Application Form
2022-2023 High Value Health Care Incubator
Due Date: August 5, 2022

Organization: _____

Description of Organization
(Brief description of your organization's location(s), staff, provided services, and size/ demographics of population served. Include comments that describe circumstances that distinguish your organization or your community from other safety net providers.)

_____
_____
_____
_____
_____
_____

Problem Statement
(Brief description of the problem your organization wishes to solve and why it is important to your organization.)

_____
_____
_____
_____
_____
_____

Prospective Core Team Members
(Include brief descriptions of their backgrounds and their relationship to the problem.)

☐Member 1: _____

☐Member 2: _____

☐Member 3: _____

☐Member 4: _____

☐Member 5: _____

Responsibilities of the Core Team Members

All Core Team Members must be able to attend the great majority of weekly 90-minute group sessions plus 60 additional minutes to work with the HVHCI coach (plus occasional homework) to complete various design-related tasks during Design Camp (September-December). They must also be available to attend a weekly 60-minute session during the 8-month implementation/launch phase of the Incubator (January-August). **Please check box attesting that the team member agrees to these requirements.**

Sponsors
(Sponsors are individuals whose position in the clinic organization or whose relationship to the problem makes their support of the problem solution a key factor in the success of the solution.)

      Sponsor 1 (CEO): _____

      Sponsor 2: _____

      Sponsor 3: _____

Submitting Applicant:

Name: _____, Title: _____

Contact Information- email: _____, phone: _____

Date: _____