

# Application/Questionnaire for MACV's APP & VSCMC's Web Site

Information in **BOLD** will be posted on the APP and the Web Site (revised 23Apr18)

**A) Organization Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, ST, Zip:** \_\_\_\_\_

**Office Phone(s):** \_\_\_\_\_

**Office Fax:** \_\_\_\_\_

**Web Site:** \_\_\_\_\_

**Email:** \_\_\_\_\_

Publish personal Contact Person  YES  NO | Publish:  name  Direct Phone  cell phone  email address?

**Contact Person:** \_\_\_\_\_

**Contact's Direct Phone:** \_\_\_\_\_

**Contact's Cell Phone:** \_\_\_\_\_

**Contact's Email:** \_\_\_\_\_

**B) Counties you cover:** \_\_\_\_\_

**C) List Topics, or circle on our Topics Page, you want to be listed under:** \_\_\_\_\_

**D) By-Line:** \_\_\_\_\_

**E) Circle all the Categories you want your organization to be listed under:**

- |   |  |   |
|---|--|---|
| 1) Advocacy Organizations                   | 13) Entertainment & Publications             | 24) <b>Information &amp; Referrals</b>      |
| 2) Babies, New & Un-Born                    | 14) Faith Based Organizations                | 25) Legal & Insurance                       |
| 3) Business & Entrepreneurs                 | 15) Family Outreach/Support                  | 26) Misc. For-Profit Businesses             |
| 4) Character Building & Life Skills         | 16) Financial & Banking                      | 28) Misc. Services (not listed)             |
| 5) Children, Teens & Juveniles              | 17) <b>Food, Meals &amp; Kitchens</b>        | 29) Muslim Outreach/Support                 |
| 6) <b>Clothing, Hygiene &amp; Household</b> | 18) Government                               | 30) ReEntry Outreach/Support                |
| 7) Community Based Organizations            | 19) <u>Health Care &amp; Mental Health</u>   | 31) Reference, Research & Grants            |
| 8) Correctional & Law Enforcement           | 19) Hispanic Outreach/Support                | 32) <b>Substance Abuse &amp; Addictions</b> |
| 9) <b>Education, Schools &amp; Colleges</b> | 20) Homeless Outreach/Support                | 33) <b>Seniors &amp; Disabilities</b>       |
| 10) <b>Employment &amp; Jobs</b>            | 21) <b>Housing, Long Term</b> -For Rent/Sale | 34) <b>Transportation</b>                   |
| 11) Disaster & Emergency                    | 22) <b>Housing, Mid Term</b> -Transitional   | 35) Veterans Outreach/Support               |
| 12) Domestic Abuse                          | 23) <b>Housing, Short Term</b> -Shelters     | 36) Volunteers & Mentoring                  |

**Please Note:** Additional information such as: **Bus Routes, Restrictions, Hours of Operation, Availability**, etc. will be added later. They will also be able to either call and/or email you thru the APP.

Please return this completed form to Emmy Hildebrand at: [ehildebrand@hvaf.org](mailto:ehildebrand@hvaf.org), and/or Don Hawkins at: [Hawkins@HHOOT.com](mailto:Hawkins@HHOOT.com). Any questions, please call Don Hawkins at 317-632-0500