

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES BUREAU OF ENVIRONMENTAL EPIDEMIOLOGY WIIN GRANT PROJECT HEAD START OR DAYCARE APPLICATION

FOR OFFICE USE ONLY

DATE RECEIVED

A MDCCCXX					
GRANTEE REGIONAL ORGANIZATION					
CONTACT PERSON & TITLE				PHONE NUMBER	
SCHOOL NAME		NUMBER (OF BUILDINGS	NUMBER OF CHILDRE	N ATTENDING TOTAL
CONTACT PERSON AND TITLE				PHONE NUMBER	
EMAIL					
STREET ADDRESS CITY					ZIP CODE
MAILING ADDRESS IF DIFFERENT			COUNTY ORIGINAL YEAR BUILT		ORIGINAL YEAR BUILT
BUILDING ADDITIONS YEAR(S) OF ADD)ITION(S)	
OWNER NAME					
Owned Leased OWNER MAILING ADDRESS OWNER PHONE NUMBER					
NUMBER OF DRINKING FOUNTAINS	NUMBER OF FAUCETS			OPEN YEAR ROUND	
MAKES AND MODELS OF DRINKING FOUNTAINS HAVE BEEN CHECKED EPA'S Lead Water Coolers Banned in 1988 Yes No					
Yes No NAME OF PUBLIC WATER SUPPLY					
				Private Well	
ADDITIONAL CONCERNS OR COMMENTS REGARDING WATER					
Electronically submit to healthydrinkingwater@health.mo.gov or					
Hard copy submit to Department of Health and Senior Services Bureau of Environmental Epidemiology					
Attn: WIIN Grant Project 930 Wildwood					

Jefferson City, MO 65109