OMB No.: 0915-0285. Expiration Date: X/XX/20XX

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration

FOR HRSA USE ONLY
Grant Number Application
Tracking Number

Form 4: COMMUNITY CHARACTERISTICS

Note: All information provided regarding race and/or ethnicity will be used only to ensure compliance with statutory and regulatory governing board requirements. Data on race and/or ethnicity collected on this form will not be used as an awarding factor.

The Service Area Population Percent and Target Population Percent will auto-calculate in EHB and can only be viewed on the read-only version of the form under Review Program Specific Forms in the left side menu.

Race and Ethnicity	Service Area Population	Service Area Population Percent	Target Population	Target Population Percent
Asian		will auto- calculate in EHB		will auto- calculate in EHB
Native Hawaiian		will auto- calculate in EHB		will auto- calculate in EHB
Other Pacific Islanders		will auto- calculate in EHB		will auto- calculate in EHB
Black/African American		will auto- calculate in EHB		will auto- calculate in EHB
American Indian/Alaska Native		will auto- calculate in EHB		will auto- calculate in EHB
White		will auto- calculate in EHB		will auto- calculate in EHB
More than One Race		will auto- calculate in EHB		will auto- calculate in EHB
Unreported/Declined to Report (if applicable)		will auto- calculate in EHB		will auto- calculate in EHB
Total:	will auto- calculate in EHB	100%	will auto- calculate in EHB	100%
Hispanic or Latino Ethnicity	Service Area Population	Service Area Population Percent	Target Population	Target Population Percent
Hispanic or Latino		will auto- calculate in EHB		will auto- calculate in EHB
Non-Hispanic or Latino		will auto- calculate in EHB		will auto- calculate in EHB
Unreported/Declined to Report (if applicable)		will auto- calculate in EHB		will auto- calculate in EHB
Total:	will auto- calculate in EHB	100%	will auto- calculate in EHB	100%

Income as a Percent of	Service Area	Service Area Population	Target	Target Population
Poverty Level	Population	Percent	Population	Percent
Below 100%		will auto- calculate in EHB		will auto- calculate in EHB
100-199%		will auto- calculate in EHB		will auto- calculate in EHB
200% and Above		will auto- calculate in EHB		will auto- calculate in EHB
Total:	will auto- calculate in EHB	100%	will auto- calculate in EHB	100%
Principal Third Party Payment Source	Service Area Population	Service Area Population Percent	Target Population	Target Population Percent
Medicaid		will auto- calculate in EHB		will auto- calculate in EHB
Medicare		will auto- calculate in EHB		will auto- calculate in EHB
Other Public Insurance		will auto- calculate in EHB		will auto- calculate in EHB
Private Insurance		will auto- calculate in EHB		will auto- calculate in EHB
None/Uninsured		will auto- calculate in EHB		will auto- calculate in EHB
Total:	will auto- calculate in EHB	100%	will auto- calculate in EHB	100%
Special Populations and Select Population Characteristics	Service Area Population	Service Area Population Percent	Target Population	Target Population Percent
Migratory/Seasonal Agricultural Workers and Families		will auto- calculate in EHB		will auto- calculate in EHB
People Experiencing Homelessness		will auto- calculate in EHB		will auto- calculate in EHB
Residents of Public Housing		will auto- calculate in EHB		will auto- calculate in EHB
School Age Children		will auto- calculate in EHB		will auto- calculate in EHB
Veterans		will auto- calculate in EHB		will auto- calculate in EHB
Lesbian, Gay, Bisexual, and Transgender		will auto- calculate in EHB		will auto- calculate in EHB
HIV/AIDS-Infected Persons		will auto- calculate in EHB		will auto- calculate in EHB
Individuals Best Served in a Language Other Than English		will auto- calculate in EHB		will auto- calculate in EHB

Special Populations and Select Population Characteristics	Service Area Population	Service Area Population Percent	Target Population	Target Population Percent
Other Please Specify (maximum 200 Characters):		will auto- calculate in EHB		will auto- calculate in EHB

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0915-0285. Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N-39, Rockville, Maryland, 20857.