

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration Cover Page		FOR HRSA USE ONLY		
		Look-Alike Number	Application Tracking Number	
Applicant Information				
Legal Name		Will pre-populate in EHB		
Employee Identification Number (e.g. 53-2079819)		Will pre-populate in EHB		
Organizational DUNS		Will pre-populate in EHB		
Mailing Address		Will pre-populate in EHB		
Select Target Population(s)				
Target Population Type		Select		
Community Health Centers		<input type="checkbox"/>		
Health Center for the Homeless		<input type="checkbox"/>		
Migrant Health Centers		<input type="checkbox"/>		
Public Housing		<input type="checkbox"/>		
Point of Contact (POC) Information				
Title of Position	Name	Phone	Email	Options
Will pre-populate in EHB	Will pre-populate in EHB	Will pre-populate in EHB	Will pre-populate in EHB	
Authorizing Official (AO) Information				
Title of Position	Name	Phone	Email	Options
Will pre-populate in EHB	Will pre-populate in EHB	Will pre-populate in EHB	Will pre-populate in EHB	

Public Burden Statement: Health centers (section 330 grant funded and Federally Qualified Health Center look-alikes) deliver comprehensive, high quality, cost-effective primary health care to patients regardless of their ability to pay. The Health Center Program application forms provide essential information to HRSA staff and objective review committee panels for application evaluation; funding recommendation and approval; designation; and monitoring. The OMB control number for this information collection is 0915-0285 and it is valid until 3/31/2023. This information collection is mandatory under the Health Center Program authorized by section 330 of the Public Health Service (PHS) Act ([42 U.S.C. 254b](#)). Public reporting burden for this collection of information is estimated to average 2 hours 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 14N136B, Rockville, Maryland, 20857 or paperwork@hrsa.gov.