



# Form 4: Community Characteristics

OMB No.: 0915-0285. Expiration Date: 1/31/2020

DEPARTMENT OF HEALTH AND HUMAN SERVICES Health Resources and Services Administration		FOR HRSA USE ONLY		
		LAL Number	Application Tracking Number	
Form 4: Community Characteristics				
<p><b>Note:</b> 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.</p>				
Race and Ethnicity	Service Area	Service Area 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
<b>Total:</b>	will auto-calculate in EHB	<b>100%</b>	will auto-calculate in EHB	<b>100%</b>
Hispanic or Latino Ethnicity	Service Area Number	Service Area Percent	Target Population Number	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
<b>Total:</b>	will auto-calculate in EHB	<b>100%</b>	will auto-calculate in EHB	<b>100%</b>

Income as a Percent of Poverty Level	Service Area Number	Service Area Percent	Target Population Number	Target 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
<b>Total:</b>	will auto-calculate in EHB	<b>100%</b>	will auto-calculate in EHB	<b>100%</b>
Principal Third Party Payment Source	Service Area Number	Service Area Percent	Target Population Number	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
<b>Total:</b>	will auto-calculate in EHB	<b>100%</b>	will auto-calculate in EHB	<b>100%</b>
Special Populations and Select Population Characteristics	Service Area Number	Service Area Percent	Target Population Number	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				
Individuals Best Served in a Language Other Than English		will auto-calculate in EHB		will auto-calculate in EHB
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 1014-N39, Rockville, Maryland, 20857.

## **Instructions for Form 4: Community Characteristics**

Report current service area and target population data. If you compile data from multiple data sources, the total numbers may vary across sources. If this is the case, make adjustments as needed to ensure that the total numbers for the first four sections of this form match. Adjustments must be explained in the [NEED](#) section of the Project Narrative.

Service area data must be specific to the LAL project and include the total number of individuals for each characteristic (percentages will automatically calculate in HRSA EHB). If information for the service area is not available, extrapolate data from the U.S. Census Bureau, local planning agencies, health departments, and other local, state, and national data sources. Estimates are acceptable.

Target population data are most often a subset of service area data. Report the number of individuals for each characteristic (percentages will automatically calculate in HRSA EHB). Estimates are acceptable. **Patient data should not be used to report target population data since patients are typically a subset of all individuals targeted for service.**

If the target population includes a large number of transient individuals that are not included in the dataset used for service area data (e.g., census data), adjust the service area numbers accordingly to ensure that the target population numbers are always less than or equal to the service area numbers.

**Note:** The total numbers for the first four sections of this form **must match**.

### ***Guidelines for Reporting Race***

- Classify all individuals in one of the racial categories, including individuals who also consider themselves Hispanic or Latino. If the data source does not separately classify Hispanic or Latino individuals by race, report them as Unreported/Declined to Report. Information provided regarding race and ethnicity will be used only to ensure compliance with statutory and regulatory governing board requirements and will not be used as a designation factor.
- Utilize the following race definitions:
  - Asian – Persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Indonesia, Thailand, and Vietnam.
  - Native Hawaiian – Persons having origins in any of the original peoples of Hawaii.
  - Other Pacific Islanders – Persons having origins in any of the original peoples of Guam, Samoa, Tonga, Palau, Truk, Yap, Saipan, Kosrae, Ebeye, Pohnpei, or other Pacific Islands in Micronesia, Melanesia, or Polynesia.
  - American Indian/Alaska Native – Persons having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
  - More Than One Race – Person who chooses two or more races.

### ***Guidelines for Reporting Hispanic or Latino Ethnicity***

- If ethnicity is unknown, report individuals as Unreported/Declined to Report.
- Utilize the following ethnicity definition: Hispanic or Latino – Persons of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

***Guidelines for Reporting Special Populations and Select Population Characteristics***

The Special Populations section of Form 4 does not have a row for total numbers. Count individuals representing multiple special population categories in all applicable categories.