

# APPENDIX A

**APPENDIX A  
APPLICATION COVER SHEET**

**COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF HUMAN SERVICES  
RFA# 21-18**

**Enclosed in two separately sealed submittals is the application of the Applicant identified below for the above-referenced RFA.**

<b>Applicant Information:</b>	
Applicant Name (LEGAL ENTITY)	
Applicant Mailing Address	
Applicant Website	
Applicant Contact Person	
Contact Person's Phone Number	
Contact Person's Facsimile Number	
Contact Person's E-Mail Address	
Applicant Federal ID Number	
Applicant DUNS Number	

<b>Submittals Enclosed and Separately Sealed:</b>	
<b>Indicate the Proposed Service Type &amp; Region</b>	<input type="checkbox"/> Lot 1 (Refugee Support Services) <b>Region</b> _____ <input type="checkbox"/> Lot 2 (Services to Unaccompanied Refugee Minors) <input type="checkbox"/> Lot 3 (Services to Older Refugees) <b>Region</b> _____
<input type="checkbox"/>	Technical Submittal
<input type="checkbox"/>	Cost Submittal

<b>Signature</b>	
Signature of an official authorized to bind the Applicant to the provisions contained in the Applicant's application	
Printed Name	
Title	

**FAILURE TO COMPLETE, SIGN AND RETURN THIS FORM WITH THE APPLICANT'S APPLICATION MAY RESULT IN THE REJECTION OF THE APPLICANT'S APPLICATION**