

Eligibility (all should be checked)					Unaccepted areas (none should be checked)				
☐ Final Document (no drafts)				□ Dated	☐ Mental Health	☐ Mental Health		☐ Primary Care and Other Health Care	
☐ All signatures present ☐ Within required timeframe				☐ Substance Abuse		☐ Professional Licensing Programs			
☐ Coversheet present and complete ☐ Clear coversheet narrative					☐ Health Care Facilities		☐ Social Services (including domestic violence)		
☐ Currently in use by CCHD				☐ Logo or other identifying info	☐ Human Services	☐ Human Services		☐ Health Care Financing Systems (e.g., Medicaid)	
☐ Protected information redacted / not present									
					Other considerations (all should be checked)				
File specific considerations					☐ Does the file op	☐ Does the file open?		☐ Do coversheet links work?	
	Email (all should be checked)			☐ Is a backup document available? (optional)		☐ Is the information verifiable?			
	☐ Contains sender i	-		a complete chain		☐ Does the file name clearly label the contents?		☐ Are all attachments or other files present?	
	☐ Contains recipient info ☐ Co		□ Cor	ntent easily understood	☐ Is the document	☐ Is the document cohesive and clear in its purpose?		☐ Is the intended audience of the document defined?	
	Meetings (all should be checked)			its purpose:	its purpose: the document defined:				
	☐ Agenda ☐ Sign-in sheet(sheet((s)	Accepted file type	epted file types (one should be checked, pdf strongly preferred)			
	☐ Minutes	Minutes ☐ Handouts or o		other presentation files, if applicable	Audio	□ mp3 □ wav			
	NACE is a second all the collection of the second of the s				Images	paste	pasted in to a: □ word document □ pdf		
	Web pages (all should be checked)				PDF	□ pd	□ pdf (correctly oriented) (not PDF portfolio)		
	□ URL included			mplete page	Spreadsheets	□ xlsx □ xls			
	□ Date visible			Slides/PowerPoint	□ pps □ ppsm □ ppsx □ ppt □ pptm □ pptx				
Presentations (all should be checked)					Text documents	□ doc □ docm □ docx □ rtf □ txt			
, ,				Audience identified	Video	□ wmv □ mpeg □ mpg □ mpv □ mp4			
	☐ Complete present	ation 🗆 [Date and location	Web page	□ htı	□ htm □ html		
	☐ Handouts or other presentation files, if applicable								
					Created by (at leas	Created by (at least one should be checked)			
					□ CCHD	□ CCHD □ Ohio Department of Health		ent of Health	
				☐ City of Canton/State of	☐ City of Canton/State of Ohio		☐ Community Partnership/Collaboration		
					□ Consultant	☐ Consultant		☐ Other Partner (not-for-profit, university, etc)	