**PUBLIC INFORMATION AND PROFESSIONAL OUTREACH (PI/PO)**

BLITZ APPLICATION FORM

*Region 6 has set aside funds for groups and service bodies, who might be otherwise financially unable to help carry the message of recovery of OA to the public arena or the professional community. These funds are made available by submitting this form and are awarded upon the recommendation of the PI/PO Committee and the approval of Region 6 Board.*

**Instructions:** Complete this application form and email it to the R6 Coordinator at [Coordinator@OARegion6.org](mailto:Coordinator@OARegion6.org) no less than 60 days prior to the next Region 6 Assembly. It is recommended that you have a representative from your Intergroup attend the PI/PO Committee meeting to support this application. **NOTE: Applications that have not previously received funds in the current calendar year will be given priority for PI Blitz funding.**

**Follow-up Requirements:** A report on the use of PI/PO Blitz funds is required. For funds awarded in the fall, a report must be submitted at least 30 days prior to the Spring Assembly. For funds awarded in the spring, a report must be submitted at least 30 days prior to the Fall Assembly. Note: R6's fiscal year runs from September to August; and PI Blitz funds must be spent in the fiscal year in which they are awarded.

|  |
| --- |
| **Intergroup Information** |
| **Full name of Intergroup:**  No short form, initials, or abbreviations |
| **Intergroup mailing address:**  Include city, state or province and zip code |
| **Contact name for Blitz:**  This is the person responsible for answering questions and for leading the Blitz. If this person will not be attending the Assembly, please complete the section below. |
| **Phone number: Email address:** |
| **Blitz presenter during Assembly:**  If different from the contact person listed above |
| **Phone number: Email address:** |
| **Blitz Overview** |
| **Name of proposal:** |
| **Brief description of initiative:** |
| **Which areas (states, provinces, cities, and/or towns) will be impacted?** |
| **Population of area(s) affected:** |
| **Start Date: End Date:** |
| **Cost Details** |
| **Total project cost (including direct and indirect costs:** $ Each Intergroup is expected to bear a portion of the cost of this initiative. |
| If applicable, please describe any research done including cost comparisons with other companies that offer the same service(s) |
| **Amount to be paid by the Intergroup: $** |
| **Amount to be paid by Region 6: $** |

|  |  |
| --- | --- |
| **Success Indicators** | |
| **By which means will the Intergroup track results?** | |
| **Metric:** | **Expectation:** |
| Increase in website hits |  |
| Increase in phone calls |  |
| Increase in Newcomer Packets sold |  |
| Increase in meeting attendance |  |
| Increase in literature sold |  |
| Increase in Intergroup attendance |  |
| Increase in referrals from professionals |  |
| Other |  |

PI/PO Blitz approval results will be announced at the Assembly. The Treasurer will confirm this and mail a check in the amount of the approved Blitz.

**Please include/attach any other documentation that will support your application.**

All submitted PI/PO activity Blitz applications must contain the signature of a Chair or Treasurer of the Intergroup presenting the proposal, verifying the proposal has been approved. Electronic signatures are acceptable.

**Signature of contact for Blitz: Date:**

|  |
| --- |
| **Signature of Chair or Treasurer:** |
| **Print name: Title:** |

*Rev. 25.08.2021*