



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 BUREAU OF ENVIRONMENTAL EPIDEMIOLOGY  
**WIIN GRANT PROJECT SCHOOL APPLICATION**

<b>FOR OFFICE USE ONLY</b>	<b>PAGE 1 OF</b>
DATE RECEIVED	

SCHOOL DISTRICT	COUNTY	COUNTY DISTRICT #
CONTACT PERSON & TITLE	PHONE #	
# OF SCHOOLS	# OF SCHOOLS WITH CHILDREN AGE 6 AND YOUNGER	

Please complete the school summary below for individual schools to be considered for the Project. Copies of page 2 may be made for additional schools.

**SCHOOLS WITH CHILDREN AGE 6 YEARS AND YOUNGER**

SCHOOL NAME	# OF BUILDINGS	SCHOOL #
CONTACT PERSON & TITLE	PHONE #	
EMAIL	% FREE & REDUCED LUNCH	
STREET ADDRESS	CITY	ZIP CODE
MAILING ADDRESS IF DIFFERENT	ORIGINAL YEAR BUILT	
BUILDING ADDITIONS <input type="checkbox"/> YES <input type="checkbox"/> NO	YEAR(S) OF ADDITION(S)	
# OF DRINKING FOUNTAINS	# OF FAUCETS	SUMMER SCHOOL <input type="checkbox"/> YES <input type="checkbox"/> NO
MAKES AND MODELS OF DRINKING FOUNTAINS HAVE BEEN CHECKED <input type="checkbox"/> YES <input type="checkbox"/> NO	<a href="#">EPA'S LEAD WATER COOLERS BANNED IN 1988</a>	
WATER TESTED FOR LEAD <input type="checkbox"/> YES <input type="checkbox"/> NO	LEAD PRESENT IN WATER <input type="checkbox"/> YES <input type="checkbox"/> NO	REMEDIATION PERFORMED <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF PUBLIC WATER SUPPLY		
ADDITIONAL CONCERNS OR COMMENTS REGARDING WATER		

Electronically submit to: [healthydrinkingwater@health.mo.gov](mailto:healthydrinkingwater@health.mo.gov)  
 or  
 Hard copy submit to: Department of Health and Senior Services  
 Bureau of Environmental Epidemiology  
 Attn: WIIN Grant Project  
 930 Wildwood  
 Jefferson City, MO 65109



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