

Instructions

Applicants wishing to appeal the Human Services Commission's preliminary allocation recommendations must complete and submit this *Appeal form*. To do so, simply complete the form and submit by clicking the submit button at the top of form.

For detailed information regarding the appeals process, please reference Section 11 of this RFP and Section IX. of the *Social Services Funding Policy for the City of Columbia* (Appendix A).

Contact

For questions, further information and/or accommodation related to disability, please contact:

Division of Human Services

1005 W. Worley Street

P.O. Box 6015

Columbia, Missouri 65205-6015

V 573.874.7488

E-mail: humanservices@gocolumbiamo.com

Web: http://www.gocolumbiamo.com/Health/HumanServices/Programs/Social_Service/bccsacfundinfo.php

Organization Name

In the space provided below, please provide your written appeal (500 word limit):