

# Paths to Black Health (PBH) Work Plan Template

African American Health Special Emphasis Grant Program

## Instructions

Complete the work plan template below based on your proposed objectives, outcomes, and activities from the grant start date through June 30, 2025 (funded grantees will develop a separate workplan for the last two years of the grant later). Add and delete headings, rows and tables as needed to align with your project. Please note that any position listed in the grant budget must also be listed in this workplan under the column “Lead Person and Support Staff” to show how they will contribute to the grant work.

## Applicant Information

Organization:

Project Name:

Primary Contact Name:

Email:

Phone:

**Total number of unduplicated participants to be served (from grant start – June 2025):**

**Other relevant unjust systems that create interconnected layers of disadvantage and inequity addressed by your activities (optional). Underline as many as apply:**

Ableism

Classism

Homophobia

Sexism

Transphobia

Other, specify

## Work Plan

### OBJECTIVE 1:

### OUTCOME 1:

| Activity | Lead Person & support staff *(titles only - NO NAMES; Must also be listed in budget)* | Partners Involved | Timeline | activity output | Estimated number served  |
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### OBJECTIVE 2:

### OUTCOME 2:

| Activity | Lead Person & support staff *(titles only - NO NAMES Must also be listed in budget)* | Partners Involved | Timeline | activity output | Estimated number served  |
| --- | --- | --- | --- | --- | --- |
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### OBJECTIVE 3:

### OUTCOME 3:

| Activity | Lead Person & support staff *(titles only - NO NAMES Must also be listed in budget)* | Partners Involved | Timeline | activity output | Estimated number served |
| --- | --- | --- | --- | --- | --- |
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