

HEAP Outreach Plan

Program Year:

District:

Contact Person:

Phone Number:

Date:

- I. Which agency is primarily responsible for outreach to special populations in your county? (e.g., district, OFA, Alternate Certifier)
 - A. Elderly:
 - B. Disabled:
 - C. Hearing Impaired:
 - D. Sight Impaired:
 - E. Non-English Speaking:
 - F. Non-Categorical Working Poor:
 - G. Other (specify):

- II. Describe how HEAP information is distributed through media, materials, and contacts in your county. Indicate the timeframes when applicable outreach activities are performed.
 - A. Media Announcements
 - Radio:
 - Television:
 - Newspaper:
 - Social Media:
 - Other:
 - B. Materials
 - Posters:
 - Brochures:

Newsletters:

Other:

C. Contacts

Local/State Legislators:

Utility/Fuel Companies:

Human Services Agencies:

Veterans Groups:

Unemployment Insurance Offices:

Churches/Religious Associations:

Community Organizations:

Other: