

**Oklahoma Department of Corrections  
Request for Letter or Memorandum**

Project/Program Title

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Name or Requesting Agency

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Address of Requesting Agency

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Contact Person at Requesting Agency

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Contact Person's Phone

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Contact Person's email address:

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Grant Number or CDFA Number:

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**FOR LETTER OF SUPPORT:**

Description of the requesting organization and the benefit to the community:

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☐ Electronic copy of the executive summary or abstract was provided.

**Submit this form by email or fax to the grants manager within 20 working days of the application due date.**

**EMAIL:** [docgrants@doc.ok.gov](mailto:docgrants@doc.ok.gov)