

**From:** [Obioma Officer](#)  
**To:** [Lorraine Belt](#)  
**Subject:** FW: Letter of Support  
**Date:** Friday, February 7, 2025 12:04:11 PM

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Executive Director  
Nevada Department of Health and Human Services  
Aging and Disability Services Division  
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**From:** Perry G. Smith <[pgsmith@health.nv.gov](mailto:pgsmith@health.nv.gov)>  
**Sent:** Friday, February 7, 2025 11:39 AM  
**To:** Obioma Officer <[Obioma@adsd.nv.gov](mailto:Obioma@adsd.nv.gov)>  
**Subject:** Letter of Support

Obioma,

The Nevada Early Hearing Detection and Intervention (EHDI) program is currently working on a grant application with the Centers for Disease Control and Prevention (CDC) for continued funding for the state EHDI program. This next round of funding is a five-year grant with exciting new additions and directions within the grant requirements. This grant will expand and strengthen existing collaborations, the data management system and strengthen existing pathways for infants to receive hearing screening, diagnostics, and early intervention within prescribed timeframes.

**Nevada's EHDI program is requesting a "letter of support" from your organization to help demonstrate existing and future collaborative efforts.**

The following are suggested sentences within a letter of support. We recommend you modify these statements to fit your organization and personal style.

*[name of your organization]* have had the privilege of partnering with Nevada Early Hearing Detection and Intervention in providing and supporting *[list appropriate examples]*

It is with great enthusiasm the *[name of your organization]* provide a letter of support and collaboration for the Early Hearing Detection and Intervention programs CDC grant application to accomplish the scope of this grant and build upon past successes.

Our partnership with Nevada EHDI has strengthened our ability to provide *[services or goals of your organization provides]*

*[name of your organization]* looks forward to providing the following support to Nevada EHDI: *[only list those which apply to your organization]*

- Advisory Committee participation
- Data submission and sharing
- Collaboration
- Audiological and/or Early Intervention expertise
- Reducing loss to follow-up or loss to documentation
- *(List others as needed)*

Finally, make a statement about how Nevada EHDI and your organization will work together to benefit families and accomplish the grant goals and that you support Nevada EHDI's efforts related to this grant.

Letter of Support recommended procedures:

1. Compose a letter stating your organization's support for Nevada EHDIs application
2. Place your composed letter on your organization's letterhead
3. Sign the letter or state the appropriate individual's name and position on the letter
4. Save as a pdf document
5. Email to: [pgsmith@health.nv.gov](mailto:pgsmith@health.nv.gov)
6. Due date: Thursday, February 20, 2025

If you have any questions concerning this letter, please contact me.

Thank you!

**Perry Smith,**

Program Coordinator  
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