



APPLICATION FORM

AWARD TO OUTSTANDING CITIES FOR IMPROVING PUBLIC SPACES FOR RECREATION AND PROMOTING PHYSICAL ACTIVITY IN THE AMERICAS ¹

CITY/ LOCAL GOVERNMENT

CITY: _____

NUMBER OF RESIDENTS: _____

FULL NAME OF MAYOR OR GOVERNOR: _____

POSTAL ADDRESS: _____

STATE: _____

COUNTRY: _____

PERSON RESPONSIBLE FOR COMPLETING THIS APPLICATION

FULL NAME: _____

TITLE: _____

POSITION TITLE: _____

POSTAL ADDRESS: (if different from above): _____

TELEPHONE (including area code): _____

E-MAIL: _____

By signing, I confirm that this application, as well as the supporting documentation, are correctly completed. Furthermore, I am hereby informed that, in the course of the contest, the community will be visited by a representative of the organizing committee for verification.

Signature: _____

Date: _____
mm / dd / yy

¹ Part of the information included in this form is based on the Governor's Council on Physical Fitness, Health and Sports and the Michigan Fitness Foundation Award.

PART 1. CITY PLANNING

Note: All of the questions below relate to plans that were approved before July 1, 2001 and are currently being/have been implemented. Public recreational areas include, but are not limited to: hiking trails, pathways, parks, grassy areas for recreation, walking routes, bike routes, bike lanes, multi-use developmental areas, pedestrian zones, boulevards, sidewalks, and sport grounds.

GENERAL

1. Has your city or local government designated a person to be in charge of matters related to improving public areas for recreation and promoting physical activity?

___ YES ___ NO

If YES, please complete the following information. If there are more than one person in charge of the improvement and/or maintenance oversight, please indicate them all.

1. FULL NAME

OF DESIGNATED PERSON: _____

POSITION TITLE: _____

TELEPHONE (including area code): _____

E-MAIL: _____

2. FULL NAME

OF DESIGNATED PERSON: _____

POSITION TITLE: _____

TELEPHONE (including area code): _____

E-MAIL: _____

2. Is there a group of persons from the community that participates in making recommendations and/or decisions related to public recreational spaces and physical activity promotion at the local government level?

___ YES ___ NO

If YES, complete the following information:

FULL NAME OF ONE PERSON FROM THE COMMUNITY:

TELEPHONE (including area code): _____

E-MAIL: _____

3. In order to provide broader access to the public, has your city developed a plan to improve public areas to facilitate recreational activities?
 YES NO

If YES, please attach a copy of the most recent plan. (DOCUMENT 1)

4. Regarding the implementation of the plan mentioned above (question 3), what is the source of the funds?
 public funds federal funds private contributions

5. Is a plan in place to protect and maintain public areas for recreational activities?
 YES NO

If YES, please attach a copy of the most recent plan. (DOCUMENT 2)

6. Is a plan in place to promote physical activity in the community, including the use of public recreational spaces in the city?
 YES NO

If YES, please attach a copy of the most recent plan or promotional materials. (DOCUMENT 3)

PEDESTRIAN SIDEWALKS AND TRANSIT

7. Are there any regulations ensuring that safe pedestrian sidewalks are built in all residential areas?
 YES NO

8. Is there an inventory and/or assessment on the state and condition of pedestrian sidewalks in the city?
 YES NO

9. What percentage of pedestrian sidewalks currently require renovation?
(Please estimate if you do not have documented information):
 30% or less 31-60% 61-80% 81% or more

10. Do streets with more than 4 lanes have medians at intersections that provide spaces for pedestrians to safely cross?
 YES NO

If YES, what percentage of streets have these medians:
 30% or less 31-60% 61-80% 81% or more

If YES, please attach a maximum of 3 photos from 3 different locations that show these medians.
(DOCUMENT 4)

11. Are sidewalks built with an incline at the corners to facilitate easy transportation of persons with physical disability or special mobility needs?
 YES NO

If YES, please attach a maximum of 5 photos from 5 different sidewalks that show these inclines.
(DOCUMENT 5)

If yes, please estimate how many pedestrian sidewalks have such pedestrian-friendly inclines?
 30% or less 31-60% 61-80% 81% or more

PART 2. PUBLIC SAFETY, RECREATION AND EDUCATION

12. Are there regulations in place to ensure the safe, shared use of transit spaces between motorists, cyclists and pedestrians? (e.g. enforceable violations, mandated bike lanes, etc.)
 YES NO

13. Are there educational campaigns or programs in place to teach motorists about the proper use of transit spaces that are shared with cyclists and pedestrians?
 YES NO

14. Does the city sponsor annual health, sport, and/or athletic events?
 YES NO

If the answer is YES, please indicate the number of events held in 2001:
 3 or less 4-5 5-9 10 or more

If YES, please specify the types of events that were sponsored:
 Running competitions Biking competitions Walking
 Community health programs Other, please specify: _____

15. Does the city sponsor specific recreational or exercise programs for older adults?
 YES NO

If YES, mark the type of recreation or exercise that was offered in 2001:
 Tai-Chi Sports Walks Yoga Dance
 Other, please specify: _____

16. Does your city have and implement a plan to control crime in unsafe neighborhoods, or is such a plan being developed?

YES NO IN PROCESS NO NEED FOR SUCH PLANS

If YES, what percentage in crime reduction was seen from its inception through July 2001:

10% or less 11-30% 31-50% 51% or more Unknown

PART 3. RESOURCES AND INFRASTRUCTURE

17. Total area (m²) or length (km) of all public recreational areas excluding those designated for sports:

_____ m² (e.g. parks, grassy areas for recreation)

_____ km (e.g. trails, boulevards, pathways, sidewalks)

18. Total area (m²) or length (km) of all public recreational areas excluding those designated for sports, which have been developed in the last 10 years:

_____ m² (e.g. parks, grassy areas for recreation)

_____ km (e.g. trails, boulevards, pathways, sidewalks)

19. Total area of all sporting grounds:

_____ m²

20. Are specific areas of your city **regularly** closed to motorists for the use of recreational activities?

YES NO

If YES, indicate both the hours per day and days per week that they are closed to motorists:

_____ days/week _____ hours/day

21. Does your city advertise (e.g. billboards, pamphlets, fliers, etc) to promote recreational activities?

YES NO

22. Did your city advertise on television to promote recreational activities in 2001?

YES NO

If YES, how many times were TV spots used to promote recreational activities in 2001?

_____ (please estimate)

23. Did the city use radio advertisements to promote recreational activities in 2001?
 YES NO

If YES, how many times did the city use radio spots in 2001?
 (please estimate)

PART 4. SCHOOLS

24. What percentage of children in your city walk to school regularly?
 10% or less 11-50% 51-75% 76-100% Unknown

25. Please indicate how many sport facilities (e.g. sport fields, swimming pools) in schools are available to the community for recreational activities outside of regular school hours (e.g. before and after school, on weekends, during vacations):
 None 50% or less 51-99% 100% Unknown

PART 5. DOCUMENTATION

Please mark with a "X" to indicate whether the information is attached. All of the supporting documents are not necessary in order to apply. Partial documentation will be accepted. Each document should not exceed more than three pages. Documents exceeding three pages will not be considered.

The size of all photos should not exceed 8" x 11" (22 cm x 28 cm). On the back of each photo, please provide the following information: (1) name of the city, state and country, (2) name of the contact person, and (3) name of the street on which the photo was taken.

DOCUMENT 1: Plan for improving public areas to facilitate recreation
 YES, included NOT included

DOCUMENT 2: Plan for protecting and maintaining public spaces for recreation
 YES, included NOT included

DOCUMENT 3: Plan for promoting physical activity in the population
 YES, included NOT included

DOCUMENT 4: 3 Photos from three different locations that show medians at intersections
 YES, included NOT included

DOCUMENT 5: 5 Photos from five different locations that show inclines at street corners for the transportation of handicapped people
 YES, included NOT included

Please submit your application by April 5, 2002 to:

Pan American Health Organization
Food and Nutrition Program
Attn: Dr. Enrique Jacoby
525 23rd Street, N.W.
Washington, D.C. 20037-2895
USA

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