# STGW Vetting Tool Submission Form

## General Information

Name of Vetting Tool: Click or tap here to enter text.

Name of Training: Click or tap here to enter text.

## Provider Information (if applicable)

Provider: Click or tap here to enter text.

Contact Person Name: Click or tap here to enter text. Email: Click or tap here to enter text. Phone: Click or tap here to enter text.

Date of Submission to CMHSP: Click or tap to enter a date.

## CMHSP Information

CMHSP: Click or tap here to enter text.

Contact Person Name: Click or tap here to enter text. Email: Click or tap here to enter text. Phone: Click or tap here to enter text.

Date Submitted to PIHP: Click or tap to enter a date.

## PIHP Information

PIHP: Choose an item.

Contact Name: Click or tap here to enter text. Email: Click or tap here to enter text.

Phone Number: Click or tap here to enter text.

Date Submitted to STGW: Click or tap to enter a date.

## STGW Information

Review Team: Click or tap here to enter text.

Date of Review: Click or tap to enter a date.

Review Status:

Approved Conditionally Approved  More information needed

Reviewer Notes: Click or tap here to enter text.

Date Response Sent to PIHP: Click or tap to enter a date.

Date Sent to IMP: (if applicable): Click or tap to enter a date.

Final Approval Date: Click or tap to enter a date.

Expiration Date: Click or tap to enter a date.