**Use this form to determine if a person is eligible to receive a DPP scholarship**

Name of DPP site:

If a safety net provider serves as this person's medical home, please highlight the type of agency.

Choose an item.

Does this person have health services through Community Care of North Carolina?

Choose an item.

A person may also qualify for a DPP scholarship if he/she earns up to 200% of poverty. For a family of 1 this number is $23,540, for a family of 2 it is $31,860, for a family of 4 it is $48,500. Is this person eligible for a scholarship?

Choose an item.

What is this person's risk test score or A1c?

**For questions about this form, contact Yvonne Garton (Yvonne.Garton@dhhs.nc.gov)**