# Application Review and Checklist

**Organization Name**

**Name of Product or System**

<table>
<thead>
<tr>
<th>CHECKLIST</th>
<th>YES/NO</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Is the application complete and signed? If not, what is missing? If sent back to application, include date sent and method.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| 2) Reference 1 contacted?  
a. Reference substantiates application information?  
b. Any issues identified?  
c. Additional information | | |
| 3) Reference 2 contacted?  
a. Reference substantiates application information?  
b. Any issues identified?  
c. Additional information | | |
| 4) Reference 3 contacted?  
a. Reference substantiates application information?  
b. Any issues identified?  
c. Additional information | | |
| 5) Application fee submitted? | | |
| 6) Recommend award of Seal of Approval? | | |

**Individuals conducting Reference Checks:**

**Name:**

**PESC Relationship:**

**Relationship to Application (if any):**

**Signature and Date:**