

Health Impact Review Request Form

| Date of request: | te of request: 1 / 27 / 14 | | | | |
|---------------------------|--|---------------------|------------|---|--|
| Requester: | Senator Liias | | | | |
| | Note: Health impact reviews may only be requested by the Governor or a legislator. | | | | |
| Staff Contact: | Name: | | | | |
| | Phone: | | E-mail: | | |
| What is the subject of | the Health Impa | ct Review? | | | |
| ⊠ Bill | Number: | 6439 | Title: | Concerning preventing harassment, intimidation, and bullying in public schools. | |
| ☐ Bill Draft | Draft Number: | | _ | | |
| ☐ Decision Package | If possible | , please attach a | copy of th | ne relevant portion/aspect of what you are | |
| ☐ Budget Proposal | requesting to be reviewed. | | | | |
| ☐ Other: | | | | | |
| | | | | | |
| Should the Health Imp | pact Review anal | yze the entire p | roposal o | r only a portion? | |
| ⊠ Entire | | | ☐ Porti | on | |
| If only a portion, please | describe what po | ortion(s) the revie | w should | analyze. | |
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| Requested completion | n date: 2 / | 13/14 | | | |
| | | | | than a 60-day turnaround during the interim, review completed in time for a committee | |
| | | | | t the time of this request, Senator Liias requested complete the review. | |
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Please consider completing the optional section on the back of this form, which will give the Board a sense of why this review has been requested.

~ Optional ~

Please consider completing this optional section, which will give the Board a sense of why this review has been requested.

NOTE: When conducting a health impact review, the Washington State Board of Health will consider various ways that a proposal might exacerbate or ameliorate health disparities. Completing this section will give the Board a head start by helping it understand the reasons why a review is being requested.

| | u think the proposal might impact health disparities and whether you believe the |
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| mpact will be in a positi | ve or negative direction. |
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| Are there specific organ eview if time allows? | izations or community groups you would like the Board to contact as part of this |
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Email: HIR@doh.wa.gov • Web site: www.sboh.wa.gov