**Implementation Pilot: Expression of Interest**

Please complete this brief form to identify your expression of interest in implementing one of the programmes offered by the Healthier Lives Implementation Network. Please keep this to two pages max. Submit to John Oetzel (john.oetzel@waikato.ac.nz).

*Name of Provider*:

*Name of Programme*:

*Background on Needs*:

*Interest of the Programme to the Community (describe any engagement with the community to support the implementation)*:

*Capacity for Implementation (identify your staffing and needs for support from the network)*: