

Call for AFL Care and Prevention Grantee Presentations

Please fill out the following and submit to Alicia.Richmond@hhs.gov by August 29, 2008

Submission Date

Workshop Title

Learning Objectives

- 1.
- 2.
- 3.

Workshop Description

Session Design

Evidence-Based Information

Presenter

Name:

Organization:

Address:

City:

State:

Zip Code:

Phone:

Fax:

Email:

Biography of Presenter(s)