

# New Jersey Society for Public Health Education, Inc.

*~Call for Posters/Displays Application~*

**Due Monday, November 1, 2010**

## **PRESENTER/CONTACT INFORMATION**

Name:

Title:

Organization:

Address:

Telephone:

Fax:

Email:

## **PROGRAM INFORMATION**

**Please specify if you are providing a:**

Poster     Tri-fold display     Other \_\_\_\_\_

**Title:** \_\_\_\_\_

### **Equipment needs**

Table                       One chair                       Two chairs

Electrical power outlet                       Easel

Other Needs \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Specific Requests \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PROGRAM GOAL AND OBJECTIVES** (please be brief)

Goal:

Objectives (Provide at least two objectives):

- 1.
- 2.

**PROGRAM OUTLINE**

Please provide an outline of your poster/display. If you are promoting a program, please include its purpose, significance, results of program implementation and relevance to conference attendees. The program should adhere to the health education principles regarding needs assessment, program development, implementation, and evaluation.

**Thank you and Good Luck!!**

**Submit this form to the Program Committee Chair  
Iesha Suber at [isuber.njsophe@gmail.com](mailto:isuber.njsophe@gmail.com)**