



HBCU BEHAVIORAL HEALTH COMMUNICATION PROMOTION CAMPAIGN 2016 - 2017

Entry Form:

All required instructional approvals for this submission have been obtained. (Please check to confirm)

Contact Information

Institution: _____ Date: _____

Contact Person: _____

Address: _____

Phone: _____ Email: _____

Team Members (Please PRINT the names and email of all participants):

Entry Information

Title of Production: _____

Check Category: Audio Video Print

Brief Summary of Production: _____

Student Project Leader Signature Date

Faculty/Advisor Signature Date

By entering the contest entrant accepts the conditions of the Contest Rules & Submission Agreement

Please return this form to the HBCU-CFE media@hbcucfe.net