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Resource Library

Sharing Center

Food Stamp Nutrition Connection Resource Sharing Form

Tell us about your nutrition education materials by completing the form below. We review each item submitted. Materials that meet the scope and criteria of the Food Stamp Nutrition Connection are included in the resource system. When you have finished completing the form, click on the "submit" button at the bottom of the page. You may also print a copy (DOC|45 KB) of this form and return it by mail.

If you would like to donate a copy of a new resource for us to review, please address it to:

Food Stamp Nutrition Connection

Food and Nutrition Information Center National Agricultural Library 10301 Baltimore Avenue, Suite 105 Beltsville, MD 20705

Part I. About You

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1.	Your name	e:													
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- 2. Your e-mail address:3. Which best describes your relationship to the resource you are submitting?

 - I developed this material (complete sections I-III).
 - I distribute or handle ordering for this material (complete sections I, II and IV).
 - I use this resource but I am not the developer or distributor of this material (complete sections I and II).

Part II. Resource Information

Please tell us about the material you are submitting.

1. Resource Title:	
2. Developer/Author(s):	
3. Primary Author's Affiliation:	
4. Publication/Revision Date:	Edition:

- 5. How is this material used?
 - Onsumer Education
 - Staff Training
 - Background Information/Research
- 6. What languages are available:
- 7. If this resource is available online, please provide the web site address (URL):

8. Briefly, describe your resource:

	Food	Stamp	Nutrition	Connection:
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	t the publisher/distributor:	
Publisher name:		
Street address:		
City/State/Zip:		
Telephone:		
E-mail:		
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Part III. Author/De Please share informa 1. Please describe the	tion about how this material was developed.	
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	May not copy. How can educators order this material?
4.	What is the cost of this material? (price/unit)
5.	Can this material be ordered in quantity? Yes No
6.	Describe any bulk discounts available.
	Comments
,	Submit Reset
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According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0518-0031. The time required to complete this information will vary based upon ones relationship to the resource being submitted. It is estimated to take 19 minutes to complete the entire survey. This includes time for reviewing

instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you need help with this form, please contact us.

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Last Modified: Tuesday, 24-Jul-2007 09:23:17 EDT

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