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| Attachment 1**OMB Control Number 0920-0765Fellowship Management System****Non-substantive Change RequestProposed changes to the CDC Public Health Associate program (PHAP) FMS Applicaton Module Date Submitted: September 4, 2015** |
| PHAP Application Module |
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| **Screen shots of modified questions** |
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# Application Status Page



# Education Page



## Add College Education



# Language Skills Section



# Special Requirements



# Personal Statement



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# Program Awareness Survey



1. **12.4-c Add functionality so the candidates can select 1st, 2nd, and 3rd regional preferences. Also include an option for no regional preference (however the candidate must still select 1-3 preferences)**

