

Form Approved
OMB Control Number: 0923-xxxx
Expiration Date: xx/xx/201x

ATSDR estimates the average public reporting burden for this collection of information as 1 hour per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB Control Number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0923-xxxx).

ATSDR Success Story Form

Project or Site Name	<input type="text"/>
Attachments	<input type="button" value="File Attachment"/>
APPLETREE Is the success story from an APPLETREE partner?	<input type="text"/>
Choose Safe Places Is this a success story for the Choose Safe Places for Early Care and Education (CSPECE) program?	<input type="text"/>
City	<input type="text"/>
State	<input type="text"/>
POC List who should be contacted for further information about the success story.	<input type="text"/>
Brief Summary In 1-3 sentences, give a brief summary of the success story.	<input type="text"/>
Background In 140-250 words, describe relevant background of site or project. Include dates and who was involved.	<input type="text"/>
Intervention/Action taken In 140-250 words, describe the solution, intervention, or action that was taken.	<input type="text"/>
Accomplishment/Impact In 140-250 words, describe the impacts, outcomes, and results of the actions that were taken.	<input type="text"/>
Link Add a relevant link to the site or project, if applicable.	<input type="button" value="Click here to insert a hyperlink"/>