









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 3 minutes 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 Health Education Activity Tracking

| | |
|--------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Title | <input type="text"/> |
| State | <input type="text"/>  |
| Cost Recovery # | <input type="text"/> |
| Site or Activity Name | <input type="text"/> |
| Site Related Education? | <input checked="" type="checkbox"/> |
| Was activity completed by cooperative agreement partner? (If yes, check box) | <input type="checkbox"/> |
| Is activity related to the Choose Safe Places for Early Childcare and Education program? (If yes, check box) | <input type="checkbox"/> |
| Date Started | <input type="text"/>  |
| Date Completed | <input type="text"/>  |
| Educator Type | <input type="text"/>  |
| Educator | <input type="text"/>   |
| Evaluation Method | <input type="text"/>  |
| HE/CI Delivery Method | <input type="text"/>  |
| # Community Participants | <input type="text"/> |
| # Understanding Health Risk | <input type="text"/> |
| # Understanding Pathways | <input type="text"/> |
| # Knowing Contact for Concerns | <input type="text"/> |
| Brief Description of Activity | <input type="text"/> |
| Were Materials Distributed? | <input checked="" type="checkbox"/> |
| # Receiving Materials | <input type="text"/> |
| # Understanding Materials | <input type="text"/> |