



PHAA Health Promotion Evaluation Award

2007 Application Form

Name:

Address:

Phone/Fax:

Email:

The following questions relate to the criteria for Applicants:

Number of years working in Health

Number of years working in Health Promotion

Are you currently a student -Yes / No

Institution at which you are a student

Beginning of career in health promotion, evaluation and/or research on public health interventions
(*explain briefly*)

Have you ever presented at a National Conference - Yes / No

Are you currently an individual member of the PHAA ? Yes / No Membership No

Short abstract of the health promotion evaluation (*up to 250 words*)

Paper describing the evaluation (*up to 1500 words*)

Please have your application endorsed by your Employer or University, below.

I hereby confirm that the paper attached is the work of the applicant named above, and that they fulfill the award criteria.

Signed (*type name if sending by email*)

Date

Name:

Employer or University:

Phone:

Email:

The deadline for submission of an application is by close of business on March 23 2007,.