

# Idaho Statewide HIV/AIDS Materials Review Panel Request

Contact: \_\_\_\_\_

Agency: \_\_\_\_\_

Address \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ FAX: \_\_\_\_\_

Date request initiated: \_\_\_\_\_ Need response by: \_\_\_\_\_

Instructions: Complete all sections below. Submit one form per item. Attach a copy of the written, printed, or video.

Mail media with this form to: Allen Haumann  
Family Planning, STD, and HIV Program  
Idaho Department of Health and Welfare  
450 W. State St., 4<sup>th</sup> Floor  
Boise, Idaho 83720-0036  
(208) 334-5937

Material title: \_\_\_\_\_

Publisher/producer: \_\_\_\_\_

Order information: \_\_\_\_\_

Copyright: \_\_\_\_\_ Length (pages/minutes) \_\_\_\_\_

Cost: \_\_\_\_\_

Material type:  Written brochure  Original locally-developed brochure  
 Printed material for outreach  Video  
 Material to be adopted for another source  Electronic Media  
 WEB site/internet  Text book  Other

Intended audience: \_\_\_\_\_

Intended age group:  Adult  College  High school  Middle School (grades 6-9)  
 Upper Elementary (grades 4-5)  Primary (K-3)  
 Pre-kindergarten  Special populations  Other \_\_\_\_\_

Target risk group/special population:  General  MSM  IDU  Partner of MSM/IDU  Women  
 Teen MSM  Teen IDU  Other \_\_\_\_\_

Purpose:  Awareness  General information  Targeted Outreach  Professional training  
 Parent Education  Classroom  Waiting room/brochure rack  Adult Outreach  
 Alt. school  Other \_\_\_\_\_

Comment/introduction: \_\_\_\_\_

Office use only  Approved  Not approved