

Eastern Virginia Medical School

Old Dominion University

**Master of Public Health Program  
MPH 768 – Community Practicum  
Proposed Projects (DUE BY OCTOBER 30, 1999)**

1. Name of organization: \_\_\_\_\_
2. Division or subunit (if applicable): \_\_\_\_\_
3. Name of individual submitting idea: \_\_\_\_\_
4. Name of potential preceptor (if different from #3) \_\_\_\_\_
5. Contact telephone number \_\_\_\_\_ Is this for #3 or #4? (Circle)
6. Description of proposed project. What would you like a student to do? Provide no more than a paragraph of explanation. Use space below or attach a sheet.

**Return completed form to Suzanne Dandoy, M.D., M.P.H., Graduate Program in Public Health, Smith Rogers Hall, Eastern Virginia Medical School, P.O. Box 1980, Norfolk, Virginia 23501-1980.**

