Government of the District of Columbia Department of Health
HIV/AIDS, Hepatitis, STD, and TB Administration
Prevention & Intervention Services Division
INSTI HIV-1/2 Rapid Test Workshop

Day: **Tuesday** Date**: November 7, 2017** Start time: **9:30 – 1:00 PM** **Check in: 9:00**
Location: **HAHSTA 899 North Capitol Street NE 4th Floor**
Training Coordinator: Cynthia Green **Trainer: Leahjane Lavin-BioLytical**

Check the response which most accurately describes your **affiliation**:

Federal/State/Local Agency	HIV/AIDS
Community- based Organization	Community Health
Private Industry	Education
Faith-based Organization	Drug Treatment
Other:	Other:

Check the responses best describes the **services** your organization provides: (Check all that apply)

You role/responsibility: Check all that apply

HIV Counselor/Tester	Mental Health Provider	Social Worker
Health Educator	Nurse/Practitioner	Sub. Abuse Specialist
Outreach Specialist	Nutritionist	Treatment Specialist
Case Manager	Program Coordinator	Manager/Administrator
DIS/STD	Physician/Clinician	Other:

Check those that apply:
1. I have **never** attended a HIV Rapid Test Workshop.
2. This is a new test for me:
3. This workshop is a refresher for me. Last workshop: / /

My agency/organization currently provides HIV Rapid Testing Services: Yes No

Please type or print.

Today's date:	Organization/agency:	
Name:	Title: Ms. Mrs. Mr. Other	
Agency Address:	City, state, zip:	
Phone and ext.:	Fax:	Your Email:
Title:	Duties:	Signature:
Supervisor's signature:	Date:	
Telephone:	Fax:	Email:

Space is limited! Participants must be pre-registered to ensure admission to workshop. Only 20 slots available!

Registration priority and workshop parameters: For individuals who currently work for funded and Indirectly funded organizations that provide HIV testing services in the District of Columbia. The workshop trains participants to provide the current test technology only. The training will *not* cover counseling skills, HIV and AIDS information, education or outreach.

E-mail completed form to: **cynthia.green@dc.gov** **or** Fax to: **(202) 671-4860**

Please notify us if you are unable to attend this workshop. (**202) 671-5079** Thank you.