**INSERT WORKSHOP TITLE HERE**

**Presenter information (please provide the below information for each presenter):**

Presenter 1:

Name:

Organization:

Position:

50-word Biography / summary of expertise:

Presenter 2:

Name:

Organization:

Position:

50-word Biography / summary of expertise:

Presenter 3:

Name:

Organization:

Position:

50-word Biography / summary of expertise:

Presenter 4:

Name:

Organization:

Position:

50-word Biography / summary of expertise:

**Background/ Overview of Workshop:**

*<Insert text here>*

**Target Audience:**

Please select from the following:

* Young people (12 – 25 years)
* Community / youth workers
* Health professionals
* Researchers

**Learning Objectives:**

*<Insert text here>*

**Duration of workshop:**

* 60 minutes

**Will this workshop be co-presented with young people?** (indicate **as applicable**)

* Yes
* No

**<<Please ensure you delete all <instructions> prior to submission. Abstracts not submitted in the correct format will be returned for correction>>**

**Disclosure of Interest Statement (example):**

The Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine recognises the considerable contribution that industry partners make to professional and research activities. We also recognise the need for transparency of disclosure of potential conflicts of interest by acknowledging these relationships in publications and presentations.

For an example of a disclosure of interest statement please see below:

*The Melon Institute and Metabolism Corp are funded by the University of Oxbridge, UK. No pharmaceutical grants were received in the development of this study.*

Note: If accepted into the program you will be requested to include a disclosure of interest slide into your presentation or include such statements in your poster.