**Insert workshop title here in bold and sentence case**

**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:** (indicate **one option** from the below choices)

* 60 minutes
* 90 minutes

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

* Yes
* No

**Disclosure of Interest Statement:** Please include disclosure of interest statement in your abstract for any contributions received relevant to this work. Please see example below:

*“The Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine and the 2018 Conference Collaborators recognise 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.”*

**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.

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