

CATEGORY E: POSTER PRESENTATION VERIFICATION FORM E 4

Name: [Click or tap here to enter text.](#)

Complete a Separate Form for **Each** Poster Presentation.

Title of Poster Presentation:

Date Offered: [Click or tap to enter a date.](#)

Conference or Event: [Click or tap here to enter text.](#)

City/State: [Click or tap here to enter text.](#)

- Attach Proof of Acceptance of the Poster.**
- Attach a Copy of the Actual Poster.**

TOTAL AP POINTS CLAIMED FOR THIS ACTIVITY:

(Transfer This Total to Point Log)