**Digital Signage Request Form**

*Slides shuffle apprx. every 20 seconds!*

*In order to ensure your information is read – and remembered – be as concise as possible to ensure viewers can digest and retain all essential info.*

*Submissions may be edited for form and length.*

*Please be sure to indicate the duration you would like the content displayed.*

**Type of Communication:**

**[ ]** Upcoming Event **[ ]**  HealthNews

**[ ]** Research Study **[ ]** Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Suggested Title:**

(35 characters maximum)

ex: FREE SCREENING: MOVEMENT DISORDERS

**Suggested Body Copy:**

(35 words maximum)

**Suggested Call to Action:**

(BRIEF, easy-to-remember URL preferred)

ex: HEALTH.USF.EDU / **RESEARCH**

Other Essential Info That **Must** Be Included: