**TRANSCEND Trainee Outreach or Patient Advocacy Activity**

\*\*Fill out form and send to Rachel Behar ([rbeha001@ucr.edu](mailto:rbeha001@ucr.edu)) after completing an activity.\*\*

* TRANSCEND Trainee Name:
* Select the type of activity: Outreach  or Patient Advocacy
* Date of activity:
* Location of activity:
* Outreach/Patient Advocacy Group or Program:
* Name and email of contact person from the Group or Program:
* Description of activity and how you contributed:

Papers

Split outreach and advo

Meetings or presentations

Courses completed