

Active Learning Plan for _____

Presenter _____

Date _____

Complete a row for each learning objective you will cover during your presentation. Provide a copy to your host when you submit your slides for review.

Learning Objective	Target Audience	Planned Active Learning Activity	How Active Learning Activity Will Be Assessed
	This objective is intended for Pharmacists Pharmacy Technicians	Quiz Group Discussion Fill-in Activity Question and Answer Other:	
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