

**Child Abuse & Neglect (C.A.N.) Prevention Program
Classroom Presentation Application**

School District: _____

SCHOOL SITE INFORMATION:					
School Address:			Telephone:		
Superintendent:			e-mail:		
Contact Person:		Telephone:		FAX:	
PRESENTATION INFORMATION					
Total Number of presentations requested:		1st:		5th:	
Day & Date	Time	Teacher's Name	Room #	# of Children	For Office Use Only

Instructions for 1st and 5th Grade Application

1. When you receive this form please call School Health Programs to coordinate dates and times available and workable for you. Two first grade classes can often be combined for the presentation. Contact telephone #s are below.
2. Please allow 45 minutes for first grade presentations, 60 minutes for fifth grade presentations. Also allow 10 minutes between presentations for transition between classes.
3. When form is completed, please sign, date and fax or e-mail to Child Abuse and Neglect (C.A.N.) Prevention Program.

Superintendent/Principal

Date

Please return this application and mail to:

Linda Cemo, C.A.N. Program Coordinator
Nan Arnold, Program Manager
School Health Programs
7000 Doe Ave., Bldg. 700
Visalia, California 93291

Telephone:	651-0130, #3710
Fax:	651-1995
E-mail:	lcemo@tcoe.org narnold@tcoe.org