



## T/TA REQUEST

Name\*

Job Title\*

Organization\*

Address\*

Phone\*

Email\*

Type of Organization\*

Other Type of Organization

Current OJJDP grantee?

Yes

No

Type of Technical Assistance\*

- Accreditation/reaccreditation assistance
- CAC staff development
- Case Review
- Case Tracking
- Child Friendly Facility
- Cultural Competency
- Forensic Interviews
- Medical Services
- Multidisciplinary Team Building
- New CAC Development
- Organizational Capacity
- Therapeutic Intervention
- Victim Advocacy

Target Audience. Check as many as apply to your request\*

- Board of directors/advisory board
- CAC director/staff
- Child protection services
- Community members
- Faith based organization
- Families
- Law Enforcement
- Medical
- Mental Health
- Non-profit organization
- Prosecutors
- Schools
- Tribal community/organization
- Victim Advocates
- Other (described)

Other Target Audience

Request Summary\*

Describe as specifically as possible, the training or technical assistance that is needed.

Previous Efforts, if any\*

Have there been previous attempts to address the condition or issue for which you are requesting training or technical assistance? If so, what actions were taken and what were the results? Include any prior training or technical assistance provided by SRCAC

Goals and Objectives\*

Describe the goals for this training or technical assistance request. What are you hoping to change as a result?

Time frame for request\*

When would you like this training or technical assistance to happen?

Location of Training

Number of people attending

Other Comments

SUBMIT FORM. Click on the button below or print form and return to [dwoodard@nationalcac.org](mailto:dwoodard@nationalcac.org)