

Date of Request

Organization name:

Street number and name:

City/Town:

Province:

Postal Code:

Contact Person:

Telephone:

E-mail:

Type of training requested: FCAS Services: Working with Families Foster Care Adoption

When & how to report known and suspected cases of child abuse and neglect

What to do if a child discloses abuse to you

The impact of child abuse and neglect on children

The effects of violence on children

How you can help – Volunteering, FCAS Children's fund

Transformation / Recent Changes in our Practice

Other:

Target Audience: (health care professionals, educators, students: etc.)

If the target audience is students, what is the age group?

Date and time requested:

Formal presentation (PowerPoint)\* or Informal (Discussion):

Location where presentation will occur if different than above:

Number of participants expected:

Comments:

\*If you would like a PowerPoint presentation, please ensure the presentation takes place in a facility with a screen. Also, please confirm at the time of booking whether you require the presenter to bring a projector and/or flip charts.

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**For Office Use Only**

<b>Date Training Completed:</b>	
<b>Name of Speaker for this presentation:</b>	
<b>Have evaluation sheets been returned to Coordinator?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No