

Crisis Services Speaker Request Form

Crisis Services Staff provide the following types of educational presentations and specialized training as part of our agency's mission. We are committed to educating our community about our organization and the issues we respond to 24 hours a day. For more information, please visit our website at www.crisisservices.org

****Please Note: We will need at least 2 weeks to process your request and to schedule staff in order to accommodate coverage.****

A. Requestor Information:

First Name: _____ Last Name: _____

Organization Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email address: _____

B. Event Information:

Date of Event (please give three options): 1st choice: _____ 2nd choice: _____ 3rd choice: _____

Time of Event: Starts: _____ Ends: _____

Location of event (if different from above): _____

Contact person and cell phone number for date of event: _____

Please give detailed directions to location; attach maps where applicable: _____

Parking instructions: _____

Audience size: _____ Audience Type (teens, staff, etc.): _____

Equipment Available for Crisis Services use:

- Computer
- Internet Access
- Powerpoint Projector
- No technology services available
- Smart Board
- Other _____

Any specialized instructions when arriving on site (ex. Check in at security desk, get visitor pass, etc.): _____

C. Type of Event/Topic Area (choose one type of event and one (or more) topics to be covered; if Community Education is chosen, please indicate if it's a tabling or a presentation)

Community Education – providing general information for schools, churches, community groups, social organizations, etc. *Although there is no fee associated with community education, donations are gratefully accepted. See below.*

Tabling -community event, health fair, etc. Staff present to provide information about the agency.

Presentation-Staff representative will provide a presentation on any of the designated community education topic areas available below. One hour is required per topic area. Please select topic(s) requested:

- Crisis Services programs and services
- Domestic Violence
- Family Violence
- Rape and Sexual Assault
- Impact of Domestic Violence on Children

Yes, we will be donating \$ _____ to help support the important work of Crisis Services

No, we are unable to provide a donation for your service at this time

Professional Training- providing advanced training to professionals. *Fee structure by hour: \$100-1st hour; \$175 for 2 hours; \$225 for 3 hours.*

Professional Training Topic Areas -- Please choose the topic area from the designated list below.

- Suicide Awareness and Lethality Assessments (Length -2 hours)
- Domestic Violence (Adolescents and Adults)
- Impact of Domestic Violence on Children
- Elder Abuse
- Rape and Sexual Assault (Adolescents and Adults)
- Health Care Response to Rape
- SANE Program Overview and Drug Facilitated Sexual Assault
- Health Care Response to Domestic Violence and/or Elder Abuse (Screening and Identification)
- Homelessness (Shelter Resources, Housing and Entitlements)
- Law Enforcement Response to Elder Abuse

Based on above, total number of training hours requested:

One hour - \$100

Two hours - \$175

Three hours - \$225

More than 3 hours -- consult with Crisis Services for fee

We will send you an invoice to assist with processing payment.

Describe why you are seeking this training at this time and 3-5 questions you expect to be answered from this training:

Please submit this form by faxing to 716-834-9881 or emailing to sflorian@crisisservices.org . We will be contacting you to make further arrangements once we receive this form. Thank you.

Crisis Services OFFICE USE ONLY: Presentation Arrangements

Speaker Scheduled: _____ Date Scheduled: _____

Confirmation Letter Sent Date: _____ Copy to Staff Scheduled Entered into Database