



TDV Presentation Request Form

If you have any questions, please contact the SAVE Youth Services Program Coordinator, Sarah at sarahh@save-dv.org

Name of Requestor	
Telephone Number	
Email	
School/Organization Name and Address	
School Counselor Name and Email	
*FOR OFFICIAL USE ONLY Presenter Assigned	

To request *Teen Dating 101*, please check the box and provide a minimum of 4 potential dates.

Presentation Options	Check Box	Dates Requesting
<u>60-Minute class</u> Stats; Youth Rights; Healthy vs. Unhealthy vs. Abusive; Warning Signs; Cycle of Violence; Resources	<input type="checkbox"/>	
<u>90-Minute class</u> Stats; Youth Rights; Healthy vs. Unhealthy vs. Abusive; Warning Signs (Activity); Cycle of Violence; Resources	<input type="checkbox"/>	



Let's end abuse right here.

To request a *Teen Dating 102* presentation for a 60-minute class, please select one topic and provide a minimum of 4 potential dates.

Presentation Topics	Check Box	Dates Requesting
Cycle of Violence & Why Victims Stay Skits & Discussion		
Gender Stereotypes Discussion & Video Clips		
DV in Media Discussion & Video Clips		
Healthy Relationships Interactive Activities		
Digital Abuse Discussion & Video Clips		

To request a *Teen Dating 102* presentation for a 90-minute class, please select two topics and provide a minimum of 4 potential dates.

Presentation Topics	Check Box	Dates Requesting
Cycle of Violence & Why Victims Stay Skits & Discussion		
Gender Stereotypes Discussion & Video Clips		
DV in Media Discussion & Video Clips		
Healthy Relationships Interactive Activities		
Digital Abuse Discussion & Video Clips		



Let's end abuse right here.

Please provide any additional comments here, or if you have any special requests for your students	Example: special needs students; a school incident; students who have experienced trauma
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Please check the periods you wish to have presentations and fill in the times for those periods below.

Monday		Tuesday		Wednesday		Thursday		Friday	
Check Period	Fill in time	Check Period	Fill in time	Check Period	Fill in time	Check Period	Fill in time	Check Period	Fill in time
0/A		0/A		0/A		0/A		0/A	
1 st		1 st		1 st		1 st		1 st	
2 nd		2 nd		2 nd		2 nd		2 nd	
3 rd		3 rd		3 rd		3 rd		3 rd	
4 th		4 th		4 th		4 th		4 th	
5 th		5 th		5 th		5 th		5 th	
6 th		6 th		6 th		6 th		6 th	
Total # students Monday		Total # students Tuesday		Total # students Wednesday		Total # students Thursday		Total # students Friday	

Does your classroom have (Yes or No)	Computer	Internet	Projector	Projection Screen

Special instructions: Parking; Checking in at your facility; etc.	Visitor parking is located directly in front of our main office
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