

OFFICE FOR VICTIMS PROGRAMS: VRA COMPLIANCE PROGRAM

AGENCY TRAINING REQUEST FORM

PLEASE FILL OUT THIS TRAINING REQUEST FORM AND FAX or E-MAIL TO:

Kelly Kissell
kelly.kissell@cdps.state.co.us
FAX: 303-239-5743 (fax)

You will receive a response to your request within 48 hours. If a request is faxed over the weekend, you will receive your response the following Tuesday

Requesting Agency/Organization

Agency Contact Person

Phone

Email

Proposed Training Dates and Times

**Projected # of
Participants**

Type of Training Session(s) Requested

Victim Rights 101

VRA Legislative Changes

Advanced VRA Training

Question and Answer Session about Compliance

Specific VRA Topic (specify) _____

VRA Responsibilities of a Specific Agency (specify agency) _____ Other

Training Location Address

Can This Training Be Provided by Video Conference Or Web Conference?

YES

NO

Types of Agencies Receiving the Training (law enforcement, DA, Judges, nonprofits, etc.)

FOR DCJ STAFF USE ONLY:

Training Occurred : Yes No Number of Participants