# C:\Users\rgiguere\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.Word\NRCJIW logo.png

# TRAINING AND TECHNICAL ASSISTANCE (TTA)

# INITIAL REQUEST FORM

This form should be used to request assistance from the NRCJIW and should be accompanied by a brief letter of support (see #6).

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please check the target area under which your request falls:

* Gender-Informed Policy and Practice
* Assessment and Classification
* Case Management
* Culture/Offender Management
* Developing Community Responses/Partnerships
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. [[1]](#footnote-1)\*Describe the assistance being requested. Why are you requesting assistance at this time? Why is it needed?
2. Describe a primary goal or outcome that you hope to achieve and the benefits you hope to derive from the receipt of NRCJIW assistance?
3. Who will receive the assistance (e.g., jurisdiction, agencies, staff levels)?
4. What is the proposed timeframe and level of assistance anticipated (e.g., number of days, estimated costs)?
5. What additional resources (if any) are needed or can you provide to support the assistance (i.e., in kind staff support, onsite training costs such as provision of a training site, printing training materials, etc.)?
6. Describe the role of key leadership in the effort. How will they support or participate in the assistance?

*A letter of support from the director or CEO of the requesting agency must accompany this form.*

1. All technical assistance recipients are required to participate in a follow-up assessment of the impact of the assistance. You will be asked to complete and submit an evaluation form (provided by the project) describing the assistance that you received and your assessment of its usefulness and effectiveness. Please indicate your agreement to fully participate in this assessment.

\_\_\_\_\_ Yes, I agree to participate in a follow up assessment of the impact of the assistance.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Submit this completed form and letter of support (as described in #6) by email, fax or hard copy to:

Becki Ney

Principal

Center for Effective Public Policy

32 East Montgomery Avenue

Hatboro, PA 19040

Phone: 215-956-2335

Fax: (215) 956-2337

Email: bney@cepp.com

1. \* Before an applicant is selected to receive assistance, NRCJIW staff may contact the applicant to clarify the goals and outcomes of the TTA and to confirm that the request falls within the scope of the NRCJIW’s TTA target areas. [↑](#footnote-ref-1)