

Organizations interested in becoming a NCMEC Program Partner are asked to complete this form and submit it via email to [outreach@ncmec.org](mailto:outreach@ncmec.org).

### ORGANIZATION/AGENCY INFORMATION

Name of Organization \_\_\_\_\_

Physical Address \_\_\_\_\_

Organization Type:      Non-Profit      Public or Private School      Law Enforcement      Other

Executive Leader/Administrator \_\_\_\_\_

Year Organization Founded \_\_\_\_\_

Counties or Area Served \_\_\_\_\_ # of Employees \_\_\_\_\_

If applicable, please provide your organization's mission statement: \_\_\_\_\_

Point of Contact \_\_\_\_\_ Title \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

### CHILD AND YOUTH SAFETY AND PREVENTION EDUCATION

Does your organization provide prevention or safety training to children, youth or parents? \_\_\_\_\_

Please list any other community-based programs your organization provides. \_\_\_\_\_

Has your organization used NCMEC prevention education resources previously? \_\_\_\_\_

Does your organization have employees dedicated to community training or outreach? \_\_\_\_\_

### COMMUNITY EDUCATION PARTNER IMPLEMENTATION PLAN

Summarize how you will implement a Community Education Partner Program in your community. Include the audience type you expect to reach (e.g. K-3, 3-5, tweens, teens, parents), places you will present (schools, churches, community groups), and how you believe you can reach the annual target of 2,500 children and adults. (Attach additional sheet if needed.)

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