

**CRIME PREVENTION EVENT AND PRESENTATION REQUEST**

**We strongly encourage at least two weeks’ notice to ensure your request can be met. All requests are reviewed for officer and resource availability.**

**For questions and/or additional information, please contact the Crime Prevention Office at (361) 886-2765 or by email** **pdcrimeprevention@cctexas.com**

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| **GENERAL INFORMATION** |
| **Date** | Enter date |
| **Name** | Enter First and Last Name  |
| **Location** | Enter Address  |
| **Start Time** | Enter Time [ ]  AM [ ]  PM |
| **End Time** | Enter Time [ ]  AM [ ]  PM |
| **Scheduled Activities** | List activities  |

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| **REQUESTOR’S INFORMATION** |
| **Requesting Group, Agency, School, Business, etc.** | Enter text |
| **Name of Contact Person** | Enter text |
| **Cell Phone Number** | Enter text |
| **Email Address** | Enter text |

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| **TYPE OF REQUEST** |
| [ ]  **EVENT** *[CHOOSE ONE OR MORE]* | [ ]  **PRESENTATION** | [ ]  **TOUR OF CCPD** |
| Choose an item | Choose Presentation | Choose Day |
| Choose an item | [ ]  Other: List | Choose Time |
| Choose an item |  |  |
| [ ]  Other: List |

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| **ATTENDANCE INFORMATION** |
| **Number of people**  | Enter Number |
| **Age Group of children**  | Enter Age Group |
| **If divided into groups, total number of groups** | Enter Number |
| **Number of people in each group** | Enter Number |

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| **OFFICIAL USE ONLY** |
| [ ]  APPROVED | Supervisor:  | Payroll ID:  | Date:  |
|  Overtime Authorized: [ ]  Yes [ ]  No |
| [ ]  NOT APPROVED | Reason:  |