



**YOUTH CRIME WATCH OF MIAMI-DADE COUNTY
PRESENTATION REQUEST FORM**

Today's
Date: _____

School: _____

Contact
Name: _____

Requested Dates of Presentations: _____

Preferred Time(s): _____

Approximate Number of Participants: _____

Grade Level(s): _____

Presentation Location: _____ Auditorium
_____ Cafeteria

_____ Class-to-Class
_____ Other (specify)

Presentation Topic(s):

- | | | |
|-----------------------------|---------------------------|---------------------------------|
| _____ Alcohol Prevention | _____ Dating Violence | _____ Reporting Crimes |
| _____ Anger Management | _____ Drug Prevention | _____ School Violence |
| _____ Auto Theft Prevention | _____ Gangs | _____ Sexting |
| _____ Bicycle Safety | _____ Graffiti /Vandalism | _____ "Stop The Violence" |
| _____ Bullying | _____ Gun Prevention | _____ Stranger Danger |
| _____ Character Education | _____ Halloween Safety | _____ Summer Safety |
| _____ Conflict Resolution | _____ Holiday Safety | _____ Traffic Safety |
| _____ Cyberbullying | _____ Identity Theft | _____ University/College Safety |
| _____ Cyber Safety | _____ Personal Safety | _____ |
| _____ McGruff | _____ Other (specify) | _____ |

Additional information that maybe helpful to the presenter:

**Please fax this request to the attention of your School Coordinator at 305-470-1676.
Please submit requests at least 2 weeks in advance of requested presentation date.**