

OVC TTAC
OFFICE FOR VICTIMS OF CRIME Training and Technical Assistance Center
TRAINING ATTENDANCE SHEET

The purpose of this form is to document information about the attendees of each training event conducted by key partners within the OVC Initiative.

In the “Type of Organization” column, please select from the following categories the one that best represents your organization.

Fed Gov—Federal Agencies Other Than Law Enforcement
FLE—Federal Law Enforcement
State/Local Gov—State and Local Government Agencies Other Than Law Enforcement
SLLE—State/Local Law Enforcement
VSP—Victim Service Providers
IESP—Immigrant/Ethnic Service Providers
Legal—Legal Providers
P—Prosecutors
MPHP—Medical/Public Health Providers

MHSA—Mental Health/Substance Abuse Providers
FBO—Faith-based Organizations/Religious Institutions
HS—Housing/Shelter
L—Legislators/Lawmakers
Biz—Civic/Business Community
SEI—Schools/Educational Institutions
VD—Vision/Dental Providers
TPAA—Trade/Professional Affiliation Associations
O—Other (Specify)

Training Title:			
Funded by Grant ID/Number:			
Primary Organization Providing Training:			
Brief Description of Training Event:			
Training Date: _____ (mm/dd/yyyy)			
Attendee Name	Organization	Organization Type	Contact Information (address, phone number, e-mail)

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