

## OFFICE OF THE YUKON CHILD & YOUTH ADVOCATE $2070-2^{nd}$ Ave. Unit 19, Whitehorse, Yukon Y1A 1B1, PH: 456-5575, FAX 456-5574

## **Public Education Request Form**

| What type of Pu  | blic Education woul                                | d you like  | to participate ir   | n?  |   |  |
|--|--|-------------|---------------------|---|---|--|
| ☐ Information session about YCAO (1/2 day) ☐ Children's Rights Training (lunch and learn) ☐ Children's Rights Training (1/2 day) ☐ Children's Rights Training (full day) |  |             | ☐ Youth En☐ TRC and | <ul> <li>☐ Child Rights Impact Assessment (CRIA)</li> <li>☐ Youth Engagement Training</li> <li>☐ TRC and Reconciliation Training</li> <li>☐ Skype Training</li> </ul> |   |  |
|  | ink your staff would<br>can be broad (ie. A        |             |                     |   |   |  |
| How many peop  | le do you think will                               | attend?     |                     |   |   |  |
| 1-5 people   | eople 5-10 people 10-20 people More than 20 people |             |                     |   | nn 20 people  |  |
| What is the nam  | e of your organizatio                              | on, busines | s or departmen      | t?  |   |  |
| What communit  | y are you based out o                              | of or would | d want your trai    | ning to be hel  | d in?   |  |
| ☐ Beaver C ☐ Burwash ☐ Carcross ☐ Carmack ☐ Dawson   | S  | ☐ Faro      | es Junction<br>o    |   | Old Crow<br>Ross River<br>Teslin<br>Watson Lake<br>Whitehorse |  |
| What is the cont   | act information for t                              | he person   | to speak with al    | bout setting up   | training?   |  |
| Name:<br>Email address: _  |  |             | Phone #:            |   |   |  |