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| **ASEBA****Research Center for Children, Youth & Families, Inc., A Non-Profit Corporation****1 South Prospect Street, St Joseph’s Wing (Room #3207), Burlington, VT 05401****Telephone: (802)656-5130****Email:** **mail@aseba.org** **/ Website:** [**http://www.aseba.org**](http://www.aseba.org) |

**Request for ASEBA Training**

**Please complete the form below and email it to** **mail@aseba.org****. You may also mail the form to: ASEBA, One South Prospect Street, Burlington, VT 05401-3456. Use additional sheets if necessary.**

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| **Name:**  | **Organization:**  |
| **Street Address:**  |
| **2nd Street Address:** |
| **City:** | **State:** | **Zip/Postal Code:**  |
| **Country:**  | **Phone:**  |
| **Email:**  |
| **What kind of training do you wish to have:** |
| **Professions, backgrounds, & types of work done by trainees:** |
| **What do your trainees know about ASEBA?** |
| **Please describe your goals for the training:** |
| **Approximately how long would you like the training to be? What dates?** |
| **❒ Online ❒ On location (City/Town/State): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Approximately how many people would attend the training?** |
| **By approximately what date do you need a commitment?** |

**Thank you!**