## PROGRAM/STUDENT/SERV (GE OUEST(ONNAVERE

**Instructions:** Please fill in the following questionnaire for your agency program/student service. This information is being collected to help standardize a database and distribution information for our schools and community members.

Partnerships	Agency Name								
Delivery Method   Delivered to a class during instructional time (i.e. whole class presentations)   Delivered to a class during instructional time (i.e. outside line (i.e. outside programs)   Delivered to a class during instructional time (i.e. outside programs, after school clubs)   Delivered one on one or in small groups during instructional time (i.e. outside programs, after school clubs)   Delivered one of classroom time (i.e. nutrition programs, after school clubs)   Delivered outside of school by referral or recommendation (community offered program)   Delivered outside of school by referral or recommendation (community offered program)   Delivered outside of school by referral or recommendation (community offered program)   Delivered outside of school by referral or recommendation (community offered program)   Delivery Personnel	, = :								
Delivery Method   Delivered to a class during instructional time (i.e., whole class presentations)   Delivered to a class during instructional time (i.e., whole class presentations)   Delivered to a class during instructional time (i.e., whole class presentations)   Delivered to a class during instructional time (i.e., occurselling)   Delivered to a class during instructional time (i.e., occurselling)   Delivered to a class during instructional time (i.e., occurselling)   Delivered to a class during instructional time (i.e., occurselling)   Delivered to a class during instructional time (i.e., occurselling)   Delivered to a class during instructional time (i.e., occurselling)   Delivered to a class during instructional time (i.e., occurselling)   Delivered to a class during instructional time (i.e., occurselling)   Delivered to a class during instructional time (i.e., occurselling)   Delivered to a class during instructional time (i.e., occurselling)   Delivered to a class during instructional time (i.e., occurselling)   Delivered to a class during instructional time (i.e., occurselling)   Delivered to a class during instructional time (i.e., occurselling)   Delivered to a class during instructional time (i.e., occurselling)   Delivered programs and a class during instructional time (i.e., occurselling)   Delivered programs and a class during instructional time (i.e., occurselling)   Delivered programs (i.e., leaf, i.e.,		☐ Yes, please list:							
Delivery Method   Delivered one on one or in small groups during instructional time (i.e. counselling)   Delivered one on one or in small groups during instructional time (i.e. counselling)   Delivered outside of classroom time (i.e. nutrition programs, after school clubs)   Delivered outside of school by referral or recommendation (community offered program)   Delivered busides of school by referral or recommendation (community offered program)   Delivered busides of school by referral or recommendation (community offered program)   Delivered busides of school by referral or recommendation (community offered program)   Delivered busides of school by referral or recommendation (community offered program)   Delivered busides of school by referral or recommendation (community offered program)   Delivered busides of school by referral or recommendation (community offered program)   Delivered busides of school by referral or recommendation (community offered program)   Delivered busides of school by referral or recommendation (community offered program)   Delivered busides of school by referral or recommendation (community offered program)   Delivered busides of school by referral or recommendation (community offered program)   Delivered busides of school by referral or recommendation (community offered program)   Delivered busides of school by referral or recommendation (community offered program)   Delivered busides of school by referral or recommendation (community offered program)   Delivered busides of school by referral or recommendation (community offered program)   Delivered busides of school by referral or recommendation (community offered program)   Delivered busides of school by referral or recommendation (community offered program)   Delivered busides of school by referral or recommendation (community offered program)   Delivered busides of school by recommunity of the program (school by recommunity of the program (school by recommunity)   Delivered busides of school by recommunity of the program (schoo	any other agencies? (include								
Target Issues   Please described how the program of the 1 state at 2 day framing workshop to deliver the program.   Issue and any indirect service treatment that needs to be deficialist to the program (i.e. 1 sacher training).   Agency Staff   Outside Instructor   Students   Students   Teacher training).   Agency Staff   Early Childhood Educator   School and Attendance Counsellor   Teacher   Teacher   Guest Speaker   School Guidance Counsellor   Trained Volunteer   Health Care Professional   Other:   Trained Volunteer   Trained Volunteer   Health Care Professional   Other:   Trained Volunteer   Trained Volunteer   Trained Volunteer   Health Care Professional   Other:   Trained Volunteer   Trained Volunteer   Trained Volunteer   Health Care Professional   Other:   Trained Volunteer   Tr	How is this program delivered in our community? Please check all	☐ Delivered one on one or in small groups during instructional time (i.e. counselling) ☐ Delivered in school, outside of classroom time (i.e. nutrition programs, after school clubs)							
Please identify all fargeted issues your program addresses.    Please identify all fargeted issues your program addresses   Child Resources   Child Resource	Time Requirements								
Carly Childhood Educator   School and Attendance Counsellor   Teacher	Please describe how the program is run and any indirect service time that needs to be dedirated to the program (i.e. Teacher								
Second Population   Confect Resolution   Confect	Please check all personnel that are involved with the delivery of	,		Students					
Target Issues Please identify all targeted issues your program addresses.    Target Issues   Health Care Professional   Cother:   Cothick and desired issues your program addresses.   Eating Disorders   Nutrition / Healthy Eating   Recreation / Physical Activity   Family Relationships   Recreation / Physical Activity   Redigion   Resiliency Development   Resiliency Development   Safety / Risk Management   Safety / Risk Management   Grief / Loss   Self Esteem   Sexual Assault   Sexual Assault   Sexual Assault   Sexual Assault   Sexual Education / Pregnancy   Health Promotion / Education   Sexual Education / Pregnancy   Crisis Intervention   Leadership Development   Social / Interpersonal Skills   Substance Abuse   Delinquency   Mediation   Suicide / Self Harm   Depression   Mental / Psychiatric Illness   Substance Abuse   Child Welfare Wards   Parents   Parents   Child Welfare Wards   Physical Disabilities   Expelled Students   Suspended Students   Truant Students   Truan		_ ,		<del>-</del>					
Anger Management		<u> </u>		☐ Trained Volunteer					
Target Issues   Anxiety		☐ Academic Success	☐ Eating Disorders	☐ Nutrition / Healthy Eating					
Target Issues   Behavioural Issues   Financial Assistance   Resiliency Development     Bullying   Gambling   Safety / Risk Management     Career Planning / Pre Employment   Grief / Loss   Self Esteem     Childcare / Child Resources   Health Promotion / Education   Sexual Assault     Conflict Resolution   Housing / Basic Needs   Sexual Education / Pregnancy     Crisis Intervention   Leadership Development   Social / Interpersonal Skills     Cultural Awareness   Life Skills   Substance Abuse     Delinquency   Mediation   Suicide / Self Harm     Depression   Mental / Psychiatric Illness     Other:   Learning Disabilities     Autism Spectrum Disorder   Parents     Child Welfare Wards   Physical Disabilities     Expelled Students   Suspended Students     Gifted Students   Truant Students     Truant Students   Truant Students   Truant Students     Truant Students   Truant Students   Truant Students   Truant Students   Truant Students   Truant Students   Truant Students   Truant Students   Truant Students   Trua		☐ Anger Management	☐ Family Relationships	Recreation / Physical Activity					
Target Issues Please identify all targeted issues your program addresses.  Please identify all targeted issues your program addresses.    Childcare / Child Resources		☐ Anxiety	☐ Family Violence / Abuse						
Target Issues Please identify all fargeted issues your program addresses.  Please identify all fargeted issues your program addresses.    Childcare / Child Resolution		☐ Behavioural Issues	☐ Financial Assistance	☐ Resiliency Development					
Target Issues Please identify all fargeted issues your program addresses.    Childcare / Child Resources   Health Promotion / Education   Sexual Assault   Sexual Education / Pregnancy   Housing / Basic Needs   Pregnancy   Pregnancy   Social / Interpersonal Skills   Substance Abuse   Delinquency   Mediation   Suicide / Self Harm   Depression   Mental / Psychiatric Illness   Other:      Special Population   Please indicate if your program is geared flowards a specific population.   Suspended Students   Suspended Students   Truant	Please identify all fargeted issues	` · ·	☐ Gambling						
Please identify all fargeted issues your program addresses.    Conflict Resolution									
Conflict Resolution		Childcare / Child Resources	☐ Health Promotion / Education	<del></del>					
Cultural Awareness  Cultur		☐ Conflict Resolution	☐ Housing / Basic Needs						
Delinquency		☐ Crisis Intervention	Leadership Development	Social / Interpersonal Skills					
Depression		☐ Cultural Awareness	☐ Life Skills	☐ Substance Abuse					
Special Population Please indicate if your program is geared frowards a specific population.    Attention Deficit / Hyperactivity   Learning Disabilities   Parents   Parents   Physical Disabilities   Physical Disabilities   Suspended Students   Suspended Students   Truant Students   Truant Students   Truant Students		☐ Delinquency	☐ Mediation	Suicide / Self Harm					
Special Population Please indicate if your program is geared fowards a specific population.    Attention Deficit / Hyperactivity   Learning Disabilities     Autism Spectrum Disorder   Parents     Child Welfare Wards   Physical Disabilities     Suspended Students   Suspended Students     Truant Students   Truant Students     Mac Specific		☐ Depression	☐ Mental / Psychiatric Illness						
Special Population Please indicate if your program is geared towards a specific population.    Autism Spectrum Disorder   Parents     Child Welfare Wards   Physical Disabilities     Suspended Students   Suspended Students     Truant Students   Truant Students     Mat Specific     Mat Specific		Other:							
Special Population Please indicate if your program is geared towards a specific population.    Autism Spectrum Disorder   Parents     Child Welfare Wards   Physical Disabilities     Suspended Students   Suspended Students     Truant Students   Truant Students     Mat Specific     Mat Specific	Please indicate if your program is geared towards a specific	☐ Attention Deficit / Hyperactivity	☐ Learning Disabilities						
Special Population       ☐ Child Welfare Wards       ☐ Physical Disabilities         Please indicate if your program is geared towards a specific population.       ☐ Expelled Students       ☐ Suspended Students         ☐ Gifted Students       ☐ Truant Students		-							
Please indicate if your program is geared flowards a specific		,							
population.  Gifted Students  Truant Students				<b>.</b>					
Mak Consider			<del>_</del> ,						
		☐ Not Considia							

Ethnicity Please indicate if the program is geared towards a specific ethnicity.	☐ Aboriginal ☐ Franco		☐ Francopho	one	ne Not Specific		
Language Please indicate in which language(s) your program can be delivered.	☐ English [		☐ French	☐ French [		□ Ojibwa	
	☐ All Elementary Grades		☐ All Secondary		ary Grades		
	Grade Ages	<u>Grade</u>	<u>Ages</u>	Grade	Ages		
Targeted Grade(s)	☐ JK 4 – 5	□ 4	9 - 10	□ 9	14 – 15		
Please indicate in which grade level(s) your program can be	☐ SK 5 - 6	□ 5	10 – 11	□ 10	15 - 16		
offered.	□1 6-7	□ 6	11 – 12	□ 11	16 – 17		
	□ 2 7-8	□ <i>7</i>	12 – 13	□ 12	17 – 18		
	□3 8-9	8 🗆	13 – 14				
	☐ All						
<b>Service Area</b> Please indicate the locations where you would offer this program.	Sault Ste. Marie Batchewana FN Blind River Bruce Mines Brunswick House Chapleau Chapleau Cree Chapleau Ojibwa	Echi Ellio FN Espi Gard	reuilville o Bay t Lake anola den River FN lais River	☐ Hornepa ☐ Iron Bric ☐ Massey ☐ Michipic ☐ Missanal ☐ Mississa ☐ Sagamol ☐ Serpent	dge oten FN bie uga FN k Anishnawbek	Serpent River FN Spanish Thessalon Thessalon FN Wawa Whitefish Lake FN White River	
<b>Costs</b> Please describe any costs	Any cost to School B	oard?	Any cost to Sc	hool/Teachers?	Any cost	to Student(s)?	
Program Vender Complete if the program was created by another organization	Company Name:		Company Website/Program Website:				
Overall Description: In a structured paragraph please provide a summary of the program. Please be sure to include the categories included in the checklist below.  This will be your program description to help teachers/parents and community members understand the program you offer (120 word limit).	Does your description ☐ Targeted Issue(s)		=	on? elivery Method / <sup>*</sup>	Time Requireme	nts	
Contact Personnel Please provide us with contact information should we have further questions regarding this questionnaire.	Name:		Phone:		Email:		
Por office use office	Unio <del>Necialità d</del> i	of the second se	ABOUT BEING		Total States		