



MANAGING THE BULL REQUEST FORM

Please forward completed form to info@bacc.org.au

CONTACT DETAILS

Name:	Position:
School/Organisation:	
Address:	
Phone:	Email:
Mobile:	

REASON FOR REQUEST

What prompted you to request Managing the Bull Program?
What are the needs/issues of students?
What outcomes are you hoping to achieve?

DATES & DURATION

Term(s)	1	2	3	4
Day of the week:				
Start date:			Finish date:	
Start time:			Finish Time:	
Venue (eg: school hall, library classroom etc):				
Please note:				
<ul style="list-style-type: none"> Program is delivered over 5 weeks. Students must attend each session to be eligible for a Certificate of Attendance. Make up sessions may be possible for students who have missed sessions due to illness. A member of staff (ie. teacher) is required to remain with group for duration of program. 				

STUDENTS

School year group:	Medium age:	
Approx. no. of students:		
Male:	Female:	Gender Neutral:
Students who identify as Aboriginal Torres Strait Islander:		

Does BACC have permission to take and use photographs of students for promotional purposes? *(please circle)*

Yes **No**

If **No**, please provide names of students that are not permitted to be photographed.

Does BACC have permission to use the school logo for promotional purposes? *(please circle)*

Yes **No**

Important information:

- Due to funding requirements, each student will be required to complete a Student Information and Consent form.
- Once your request form has been received a youth worker will contact you to organise a meeting (in person or telephone) to discuss the program and complete the Managing the Bull Planning Checklist.
- If either of the above does not occur, BACC will be unable to deliver the program.

For further information please contact BACC on 9626 5312

Office use only

Application successful? Yes / No

Confirmation email (date): _____

Photo Consent discussed? Yes / No

Projector/Screen available? Yes / No

Whiteboard available? Yes / No

Additional Comments/ Information: