

## Presentation / Resource Day Request Form

To request a Division of Developmental Disabilities (DDD) Presentation or Resource Day, submit this form to <a href="mailto:DDD.TransitionHelpdesk@dhs.nj.gov">DDD.TransitionHelpdesk@dhs.nj.gov</a> and include **Presentation Request** in the subject line.

Requestor Informa	tion					
Contact First Name:		Las	st Name:	-	Today's Date:	
Work Phone:	Mobil	Mobile Phone:		Email:		
Organization / School:	:					
Address:						
City:		State:	Zipcode:	County:		
This request is for (se	elect one or both	):				
Presentation  Presentations are usus hours long, with time questions. Presentation conducted in-person of personalized webinar.  Please complete appli	included for ons can be or through a	DDD will v Resource conducted 15- to 20- members guidance.	Day, which can be d virtually or in pe minute time slot to meet one-to-	Is to organize a transition on the scheduled during or aften the serson. During a Resource ts for school personnel, stu the one with DDD staff to ask	er school h Day, schoo udents and	ours and ols will schedule d/or family
	. ,	eiow.				
Presentation Reque	est					
First-Choice Presentation Date:			Second-Choice Presentation Date:			
Presentation Address	(if different from	above):				
Requested Venue: Start Time:	Length:	In-Person	•	Individual Presentation Number of Attendees:		l Presentation
Have you already had	•				Yes	NO
Do you wish to reques		resenter? If Y	'ES, Presenter N	ame:		
Requested Presentation		de de la companya de	. III	faccionala		
Audience Type(s): Please select all othe	Individuals/Stu			fessionals		
Navigating the DDD Getting to the Why:	English & ting the Life ( -Hand Experie	English & Spanish version of Navigating DDD  ng the Life Course Tools to Support Employment land Experience of a Person with a Disability			DDD in a snapshot (30 minut Employment Self Determination Other	
Resource Day Requ	uest					
Type of Resource Day	Requested:	Transition R	esource Day	Employment Resource	Day	Both

Second-Choice Resource Day Date:

NJ Division of Developmental Disabilities

DDD staff will contact you to discuss the details of your request.

First-Choice Resource Day Date: