State Opioid Response (SOR II)

*A Transforming Approach to Opioid Prevention:*

*Developing Systemic Change in Schools*

**District Application for Technical Assistance**

District Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:

Contact: Role:

Phone Number: Email:

Application submitted by:

Schools participating in Technical Assistance:

School Name: Administrator:

School Address: Grade Level:

Phone Number: Email:

School Name: Administrator:

School Address: Grade Level:

Phone Number: Email:

**Please answer the following questions:**

1. What is the identified need of the district related to Opioid and Substance Misuse Prevention? (250 words or less)
2. How will this project fit with district/school priorities and other existing initiatives? (250 words or less)
3. What evidence demonstrates the district/schools capacity for and commitment to successful participation in this project? (250 words or less)

Applicants will be notified via email no later than June 21, 2021.

For questions, please contact:

Paquita Jarman-Smith

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