D.A.R.E. Iowa T-Shirt Order Form Instructions 2017-2018 School Year

D.A.R.E. Iowa Elementary Class T-Shirt Order

Contact Person						
Telephone Numb	per					
Department Nan	ne					
Email Address						
SHIPPING ADDRE	ESS					
Street						
City		ZIP				
Style Name and I	Number (the number under	the shirt)				
STYLE NAME		STYL	STYLE NUMBER			
T-Shirt Sizes:	Small					
	Medium					
	Large					
	XL					
	2XL					
Total shirts orde	red					
Personalization Requested (Check one)		□YES	□no			
,	A Name Drop includes adding t	nal Charges Will Occur. Please s he name of your town, departm Design T-Shirt charges, please c	nent or school name	below the design on the front of the t-shirt.		
		144-499 -	s - \$1.00/shirt \$0.70/shirt - \$0.40/shirt			

Orders will not be processed without completed survey form and update of information and must be received by December 31, 2017. If you have any questions on this order, please contact Terry Dehmlow at (319) 269-4104 or email him at iacop2@mchsi.com. Please mail completed forms to:

\$20 set up charge

Terry Dehmlow PO Box 76 Denver, IA 50622

D.A.R.E. Iowa T-Shirt Order Form Instructions

2017-2018 School Year

D.A.R.E. Iowa Jr. High T-Shirt Order

Contact Person									
Felephone Number									
Department Name									
Email Address									
SHIPPING ADDRE	ESS								
Street									
City		ZIP							
Charles Names and I	November (the county of a sheet	alata)							
Style Name and Number (the number under the shirt)									
STYLE NAME		STYLI	E NUMBER						
T-Shirt Sizes:	Small								
1-31111 € 31263.									
	Medium								
	Large								
	XL								
	2XL								
Total shirts orde	red								
Personalization F	Requested (Check one)	□YES	□no						
,	A Name Drop includes adding the na	narges Will Occur. Please se ame of your town, departmo on T-Shirt charges, please co	ent or school name below	the design on the front of the t-shirt.					
36-144 shirts - \$1.00/shirt 144-499 - \$0.70/shirt 500 shirts + - \$0.40/shirt \$20 set up charge									

Orders will not be processed without completed survey form and update of information and must be received by December 31, 2017. If you have any questions on this order, please contact Terry Dehmlow at (319) 269-4104 or email him at iacop2@mchsi.com. Please mail completed forms to:

Terry Dehmlow PO Box 76 Denver, IA 50622

2017 D.A.R.E. Statistical Data Sheet

School Year 2017 / 2018

City, State:

Agency:

 Check the box to the right of the appropriate instructors involved in the delivery of the control of the control		• •		ie table beld	ow the numb	er of
Type of Agency		Number of Instructors				Year Total
Federal						
State						
Sheriff's Dept.						
Police Dept.						
Indian Agency						
Other (University, etc.)						
According to their rank, indicate on the to D.A.R.E. activities including teaching a Rank			cers and per	centage of	their time as	ssigned Year Total
		1-25 /6	20-30%	51-75%	76-100%	year lotal
Reserve Officers						
Police Officer or Deputy						
Detective or Corporal						
Sergeant						
Lieutenant						
Captain						
Chief or Sheriff						
Other:						
3) Indicate on the table below the number of	of Schools ar	nd Students	that partici	pated in the	e different o	curricula
of the D.A.R.E. program offered by your	' agency.					
D.A.R.E. Curriculum	Nu	mber of Sch	nools	Number of Students		
Elementary 5th / 6th Grade						
K-4 Program						
Junior High Program						
Senior High Program						
Other:						
Totals						
4) Number of parents participating in the D.5) Indicate on the table below the number of the participating in the D.	5		cts, and Com	nmunities yo	ur agency pr	ovides
the D.A.R.E. program to.				<u> </u>		
Number of Schools with D.A.R.E.						
Number of School Districts with D.A.R.E.	+6 0 4 0 0					
Number of Cities, Townships, etc. served wi	IN D.A.K.E.					