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**NCPC PARTICIPANT QUESTIONNAIRE**

(Visit [www.northcoastalpreventioncoalition.org](http://www.northcoastalpreventioncoalition.org) PRIOR to completing to confirm your interest in NCPC programs)

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| --- | --- | --- | --- | --- | --- | --- | --- |
| **PERSONAL** | | | | | | | |
| NAME (LAST, FIRST, MIDDLE) | | | | | | | |
| ADDRESS (NUMBER AND STREET) | | | | | | | |
| CITY, STATE ZIP | | | | | | | |
| EMAIL | | | | | PHONE | | |
| COLLEGE/UNIVERSITY ATTENDING (if applicable) | | | | | MAJOR COURSE OF STUDY (if applicable) | | |
| NUMBER OF HOURS DESIRED       hours total | | | | | DESIRED START DATE DESIRED COMPLETION DATE  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| DESIRED SCHEDULE AND AVAILABILITY:        # HRS/WEEK  PLEASE LIST THE DAYS AND TIMES YOU WOULD BE AVAILABLE: | | | | | | | |
| TIME | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | | FRIDAY |
| BEGIN |  |  |  |  | |  |
| END |  |  |  |  | |  |

|  |  |  |
| --- | --- | --- |
| **PROGRAM INTEREST AND EXPERIENCE** | | |
| **SKILLS YOU MOST WANT TO DEVELOP (Check all that apply – double click box to check if completing in Word)**  Research, data analysis and reports  Public speaking  Website design and/or maintenance  Educational materials development  Film/video production and/or graphic design  Community outreach  Community needs assessment  Event planning and coordination  Grant development | **PREVIOUS EXPERIENCE (Check all that apply - double click box to check if completing in Word)**  Microsoft Word  Microsoft Excel  Microsoft PowerPoint  Microsoft Publisher  Film/Video production  Graphic design  Website design and/or maintenance  Public speaking  Bilingual (English/Spanish)  Tutoring/working with youth | **SOCIAL MEDIA EXPERIENCE (Check all that apply - double click box to check if completing in Word)**  Facebook  Instagram  Twitter  Other |

**PARTICIPANT GOALS**

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| *NCPC’S MISSION IS TO REDUCE THE HARM OF ALCOHOL, TOBACCO, MARIJJUANA AND OTHER DRUGS IN THE CITIES OF CARLSBAD, OCEANSIDE AND VISTA THROUGH COMMUNITY ACTION, EDUCATION, SUPPORT AND COLLABORATION.*  PLEASE DESCRIBE WHY YOU WOULD LIKE TO PARTICIPATE WITH NCPC PROGRAMS: |
| WHAT SKILLS DO YOU HAVE TO CONTRIBUTE TO NCPC PROGRAMS? |
| WHAT SKILLS AND/OR EXPERIENCES DO YOU HOPE TO OBTAIN BY PARTICIPATING WITH NCPC PROGRAMS?  . |
| DO YOU HAVE ANY PROJECTS IN MIND THAT YOU WOULD LIKE TO BE ABLE TO ACCOMPLISH WITH NCPC PROGRAMS? |
| DO YOU HAVE ANY RELATIVES CURRENTLY EMPLOYED AT VISTA COMMUNITY CLINIC? IF YES, INDICATE NAME, RELATIONSHIP, AND DEPARTMENT. |

Thank you for your interest in the North Coastal Prevention Coalition

Please submit this completed form and email to [info@northcoastalpreventioncoalition.org](mailto:info@northcoastalpreventioncoalition.org)

If you do not receive a response within 5 working days, please contact:

Erica Leary, Program Manager – [eleary@vcc.org](mailto:eleary@vcc.org) OR

Debbie Obregon, Project Assistant – [dobregon@vcc.org](mailto:dobregon@vcc.org)