



COMMUNITY | OUTREACH | RESOURCES | EDUCATION
C.O.R.E.



Celebrating Families

COMMUNITY



OUTREACH



RESOURCES



EDUCATION

**DEPARTMENT OF JUVENILE JUSTICE
OFFICE OF PREVENTION AND VICTIM
SERVICES**

THURSDAY, SEPTEMBER 19, 2019

5:00 PM - 7:00 PM CST

GLENWOOD COMMUNITY CENTER

722 East 9th Court
Panama City, FL 32401

Light refreshments and door prizes will be
provided

For more information, contact Statewide Community
Engagement Coordinator, Verla Lawson-Grady at
(850) 717-2423



The Florida Department of Juvenile Justice, Office of Prevention Services invites you to attend our Community Outreach of Resources and Education (C.O.R.E.) Resource Fair. This event will be held Thursday, September 19, 2019 from 5:00 p.m. – 7:00 p.m. CST at the Glenwood Community Center, located at 722 East 9th Court, Panama City, FL 32401.

Exhibitor Registration Form

Tables and chairs will be provided, (please feel free to bring your agency's table cloth/display).

Information about Your Business or Organization

Name of Organization _____
Address _____
City _____ State _____ Zip _____
Telephone _____ Website _____
Brief Descriptions of your products and services (Not to exceed 50 words) _____

Exhibitor Contact Information

Exhibit contact person _____
Mailing Address (if different from above) _____
City _____ State _____ Zip _____
Telephone _____ Fax _____
Email address _____

Will you be able to donate a door prize? Yes No if yes, please give a brief description _____

Return this form by September 10, 2019 to:

Ms. Verla Lawson-Grady
Statewide Community Outreach & Engagement
Coordinator
verla.lawson-grady@djj.state.fl.us
(850) 717-2423



C.O.R.E. OUTSTANDING NOMINATION FORM

PERSON NOMINATING RECIPIENT

First Name: _____

Last Name: _____

Organization: _____

Title: _____

Phone: _____

I am a (choose most accurate category):

- Student
- Parent
- Service Provider
- Educator/Teacher/School District Official
- Law Enforcement/ Corrections Officer
- Judicial System
- Community Leader
- Other _____

Email: _____

Relationship to Nominee: _____

YOUTH/FAMILY NOMINEE:

First Name: _____

Last Name: _____

Phone: _____

School: _____

Grade: _____ **Age:** _____

Email: _____

Parent Contact: _____

COMMUNITY PARTNER NOMINEE:

Organization: _____

Contact Person: _____

Phone: _____

Email: _____

Tell us Why your Nominee Deserves this Award

Please be as specific as you can and use additional sheets if necessary. Discuss nominee achievements in their community, school, church, etc. Consider how the nominee made their community better and how the nominee turned adversity experienced to their advantage?

Signature

Date