



## PSCBW Initial CPP Application Prevention Experience Questionnaire

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Applicant Name: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Please address the following questions in your description of each prevention experience submitted in your Initial CPP Application. There is maximum of 900 characters allowed in each text field.

1. What are the overall goals of the organization or program?
2. What the problems, conditions, behaviors and/or consequences are the organization or program seeking to prevent?
3. What risk and/or protective factors for those problems, conditions, behaviors and/or consequences are the organization or program seeking to change?
4. How were the activities that you specifically performed in this position intended to prevent the risk and/or increase the protective factors?
5. How did the activities that you specifically performed in this position contribute to these prevention goals of the organization or program?

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date