



PSCBW Initial CPP Application **Prevention Experience Questionnaire**

Applicant Name: _____ **Date Submitted:** _____

Please address the following questions in your description of each prevention experience submitted in your CPP application:

- 1. What are the overall goals of the organization or program?** (500 Character Limit)

- 2. What problem(s), condition(s), behavior(s), or consequence(s) is the organization or program seeking to prevent?** (500 Character Limit)

- 3. What risk and/or protective factors for that problem(s), condition(s), behavior(s), or consequence(s) is the organization or program seeking to change?** (500 Character Limit)

- 4. How were the activities you performed in this position intended to prevent the risk factor(s) or increase the protective factor(s)?** (500 Character Limit)

- 5. How did the activities you performed in this position contribute to these prevention goals of the organization or program?** (500 Character Limit)