



Department of State Health Services

Send to: 700 University Blvd MSC. 221
 Kingsville Texas 78363
 PHONE (361) 593-2237
 email: Randolph.creel@tamuk.edu
<http://www.dshs.state.tx.us/>

DSHS Use Only:

Reviewed By:

Approved Date:

Campus Program for Minors

Sexual abuse and child molestation training and examination information

Texas Education Code § 51.976; 25 Texas Administrative Code § 265.401 – 265.405

INSTITUTION OF HIGHER EDUCATION holding the off-site program or on the grounds of which the program is held:

ADDRESS: ZIP CODE:

CITY: COUNTY: COUNTY ID#:

PROGRAM OPERATOR if different from above: PHONE:

PHYSICAL ADDRESS of location where program will be held, if different from above: ZIP CODE:

CITY: COUNTY: COUNTY ID#:

DATES OF OPERATION:

Employee Name	Date Employed	Training Course Name	Course Approval #	Date Training Completed

Program Operator: (signature) Date: