



# Florida Council Against Sexual Violence

*Because Sexual Violence Shatters Lives, Wounds  
Communities, and Perpetuates Injustice*

**SART TEAM SCHOLARSHIP APPLICATION  
SANE Training  
Miami Beach, Florida  
June 16-20, 2008**

Registration fees for complete SARTs (Sexual Assault Response Teams) are waived for the SANE Training. A complete team includes a Health Professional (R.N., ARNP, M.D., etc.), a Prosecuting Attorney, Law Enforcement Officer, and a Sexual Assault Survivor Advocate from a certified rape crisis center.

Please designate a “team leader” from your group who will be responsible for communicating with FCASV about the SANE training, registration, and other materials.

Team Leader: \_\_\_\_\_

*\* FCASV cannot guarantee seating for registrations received after May 12\**

Health Professional Team Member

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Position/Title: \_\_\_\_\_ Badge Name: \_\_\_\_\_

Agency/Organization: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Professional Credentials  
\_\_\_\_\_

Full Registration

Daily Registration. Please designate days of attendance:

\_\_\_\_\_

**Law Enforcement Officer Team Member**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Position/Title: \_\_\_\_\_ Badge Name: \_\_\_\_\_

Agency/Organization: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Professional Credentials \_\_\_\_\_

Full Registration

Daily Registration. Please designate days of attendance:

\_\_\_\_\_

**Sexual Assault Survivor Advocate Team Member**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Position/Title: \_\_\_\_\_ Badge Name: \_\_\_\_\_

Agency/Organization: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Professional Credentials \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Professional Credentials \_\_\_\_\_

Full Registration

Daily Registration. Please designate days of attendance:

\_\_\_\_\_

**Prosecuting Attorney Team Member**

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Position/Title:** \_\_\_\_\_ **Badge Name:** \_\_\_\_\_

**Agency/Organization:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Full Registration**

**Daily Registration. Please designate days of attendance:**

\_\_\_\_\_

**Please check the appropriate boxes:**

**One or more of our team members require special assistance to participate in the conference. Please attach a written request prior to May 16.**

**Please send our team information about CEUs (CLEs for Prosecutors)**

**Please provide a short explanation of the skills your team is hoping to acquire during the training:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Mail registration information to:**

**FCASV Annual Conference 2008  
Attn: SANE Training  
1311 N Paul Russell Rd., Suite A204  
Tallahassee, FL 32301-4853**

**Make hotel reservations by May 5, 2008 for the \$90 conference room rate.  
Valet parking is \$20 per day. Contact the Deauville Beach Resort directly at  
(800) 327-6656, reservation code: FNVWS08**

**For further information about the SANE training please contact:**

**Micheala Denny  
SANE/SART Coordinator  
Florida Council Against Sexual Violence  
mdenny@fcasv.org  
850-297-2000**

