## **REQUEST FOR PREVENTION PLAN AMENDMENT** (a separate form should be submitted for each county)

AMENDMENT PERIOD:			
AGENCY NAME:			
SUBMITTED BY:			
COUNTY:			
Strategies requested for amendr	nent (check all that apply):		
Information Dissemination	Community Based ProcessEduc	ation	
Alternatives Pro	oblem Identification and Referral Environment	tal	
STRATEGY (List only one):			
		YES	NO
selected strategy?	updated to support the addition and/or changes to the	120	
Was the capacity section updated to support the addition and/or changes to the selected strategy?			
Has this strategy been previously	amended during the plan cycle?		
Explain the reason for the propos	sed amendment:		
STRATEGY (List only one):			
		YES	NO
Was the assessment/data section selected strategy?	updated to support the addition and/or changes to the		
	l to support the addition and/or changes to the selected		
	amended during the plan cycle?		
Explain the reason for the propos	sed amendment:		
	le to the selected strategy, including changes to the assessm lighted in the submitted amendment):	ent and capa	acity

	YES	NO
Was the assessment/data section updated to support the addition and/or changes to the selected strategy?		
Was the capacity section updated to support the addition and/or changes to the selected strategy?		
Has this strategy been previously amended during the plan cycle?		
Explain the reason for the proposed amendment:		
Briefly describe the changes made to the selected strategy, including changes to the assessmen sections (changes should be highlighted in the submitted amendment):	t and capa	city
STRATEGY (List only one):		
	YES	NO
Was the assessment/data section updated to support the addition and/or changes to the selected strategy?		
selected strategy.		
Was the capacity section updated to support the addition and/or changes to the selected strategy?		
Was the capacity section updated to support the addition and/or changes to the selected		
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