Thank you for your interest in the Drug Impairment Training for Education Professionals (DITEP) training!

General Information:

* DITEP is a training geared towards school-based personnel (e.g. principals, teachers, school nurses, school resource officers, counselors, etc.) and other community/parent organizations as a way to increase competence and confidence in evaluating and documenting impairment of students suspected of using, abusing, or being under the influence of drugs or alcohol. Such information can be considered by school/district leadership teams to develop or revise related policies and procedures.
* This is a 2-day training, though the days do not have to be consecutive. Day 1 is more didactic and informational with no limit to the number of attendees. Day 2 is more applied and experiential and ideal for a group size of 20. Multiple Day 2 sessions can be offered to accommodate larger number of participants as needed.
* The training is led by NYS Drug Recognition Experts (DRE) from your local region.
* Once the training request is approved (e.g. an assigned DRE and location has been determined), an electronic PDF file or hard copy of training materials will be sent to the indicated point of contact.
* This training is provided free of charge; however, the school/district must provide copies of the associated reproducible materials for all attendees for both training days.
* For both training days, the school’s/district’s identified point of contact will be responsible for providing a roster of attendees’ names and positions, as well as a sign-in sheet for before- and after-lunch events. A copy of these sheets should be provided to the DRE at the training.

**Please provide the following information so that your training request can be efficiently processed. Note that only complete forms can be processed.**

Name of Requestor:

Title/ Position of Requestor:

School District/ Organization Affiliation:

City/Town:

Please indicate if the training for a school, district, or county.

Approximate Number of Attendees for the Training:

Please list at least three (3) possible dates for this 2-day training. Dates do not have to be consecutive.

Anticipated Location of Training:

How did you learn about the DITEP training opportunity?

