

**D.A.R.E. INSTRUCTOR AND STATISTICAL INFORMATION
2018-2019 SCHOOL YEAR**

CONTACT INFORMATION

1. Agency Name: _____
2. Phone #: _____
3. School District (County): _____
4. School Semester D.A.R.E. Curriculum taught:
 1st Semester 2nd Semester Entire Calendar Year
5. D.A.R.E. Contact: (name of person completing this survey)
Name: _____
Title/Rank: _____
Phone #: _____
E-mail Address: _____

ADMINISTRATIVE

NOTE: Please include information for school year ending in 2019.

1. Total number of certified D.A.R.E. Officers in your agency: _____
2. Total number of certified D.A.R.E. Officers teaching: _____
3. Are you continuing with your D.A.R.E. program during the next school year (2019-2020)?
 Yes No
4. If not continuing, reason: _____

D.A.R.E. ELEMENTARY SCHOOL CURRICULUM

NOTE: Please include information for school year ending in 2019.

Elementary Schools: (indicate number of schools)

Total Number: _____ **Public:** _____ **Private:** _____

1. Do you teach D.A.R.E. K-4 visitation lessons? Yes No

2. Total number of K-4th grade students taught: _____
3. Total number of 5th and 6th grade classes receiving the entire 10-week elementary curriculum: _____
4. Total number of 5th and 6th grade students receiving the entire 10-week elementary curriculum: _____

ADDITIONAL COMMENTS IF NEEDED:

D.A.R.E MIDDLE SCHOOL CURRICULUM

NOTE: Please include information for school year ending in 2019.

Middle Schools: (indicate number of schools)

Total Number: _____ **Public:** _____ **Private:** _____

1. Number of 7th and 8th grade classes receiving the entire 10-week middle school curriculum: _____

2. Total number of 7th and 8th grade students receiving the entire 10-week middle school curriculum: _____

ADDITIONAL COMMENTS IF NEEDED:

Thank you so much for your input and feedback. We know your time is valuable!