

## **Department of State Health Services**

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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

Tonus	Education Code \$ 51.570	, 23 Texas Hammistrative Code 3	203.101 203.103	
INSTITUTION OF HIGHER E held:	EDUCATION   hold	ling the off-site program or	on the grounds of whi	ch the program is
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:		
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