

# ON-SITE TRAINING, GROUP GRIEF COUNSELING & CRITICAL INCIDENT STRESS DEBRIEFING REQUEST FORM

## Alabama Department of Finance Division of Risk Management Employee Assistance Program (EAP)

**Please check one of the following:**

**Group Grief Counseling**    **Critical Incident Stress Debriefing Request**

Agency Name:

Point of Contact:

Phone Number:

Email Address

Physical Address

Service Requested

Preferred Date(s)

Preferred Time(s)

Incident that Occurred

Number of Employees Expected to Need Services

**On-Site Training Request**

Agency Name

Point of Contact

Phone Number

Email Address

Physical Address

Training Topic

Preferred Date(s)

Preferred Time(s)

Audience (i.e. managers, employees or supervisors)

Audio/Visual Capability (projector, laptop)

Number of Employees

Please submit your request to one of the following:

**Email:** [EAP.Information@finance.alabama.gov](mailto:EAP.Information@finance.alabama.gov)

**Phone:** 334-223-6153 ext. 153 (Please Note: All phone requests must be followed up with a completed form)

**Fax:** 334-954-5353 Attention: Kwatasian Hunt

**Please Note:**

- A four (4) week advance notice is required for all training requests
- Training cancellations and/or changes must be submitted to EAP Coordinator within five (5) business days