

**2017 National Exemplary Awards for
Innovative Substance Abuse Prevention Programs, Practices and Policies
APPLICATION COVER SHEET
(INCLUDE WITH APPLICATION)**

1. Has this intervention been submitted for an Exemplary Award in previous years? [Circle one]

Yes

No

2. What is the primary target for this program, practice or policy? [Circle one]

Individual

School-Based

Family/Parent

Peer/Group

Workplace

Environmental/Community-Based

Other

If Other, explain: _____

PROGRAM INFORMATION

Program Name: Evansville Medication Diversion Prevention Program

Agency: Building A Safer Evansville Inc. (BASE)

Contact Person: Jennifer Braun

Email: jbrown.base@gmail.com

Address: 150 E Main Street Suite 17 Evansville, WI 53536

Phone: (608) 436-1275

Fax: N/A

I have reviewed the information contained in this application and certify that it is accurate, to the best of my knowledge.

Jennifer Braun
Program Director Signature

5/5/2017
Date

NOMINATING AGENCY/ORGANIZATION INFORMATION

Agency/Organization: Rock County Public Health Department

Contact Person: Kelly Klingensmith

Email: kelly.klingensmith@co.rock.wi.us

Address: 3328 U.S. Hwy 51 N

Janesville, WI 53547

Phone: (608) 757-5431

Fax: (608) 758-8423

I have reviewed the information contained in this application and certify that it is accurate, to the best of my knowledge.

[Signature]
Nominating Agency Signature

5/5/2017
Date