



CURRICULUM MODIFICATION FORM

TRAINER: If you wish to change the order of the modules or add other materials to the standardized MHSS curriculum, please fill in this form and return it to the address below:

Trainer's Name: _____

Dates of Training: _____

Mailing Address: _____

Phone Number: _____ Email: _____

Please check one:

- Request to change order of the modules
 Request to supplement the curriculum

Please explain the reason for your request below. If you are supplementing the curriculum, please also include a citation of the additional material(s). If you need more room, please attach additional sheets.

Multiple horizontal lines for text entry.

Please return completed form to:

Scott Bernier
USM Muskie School
The Center for Learning
12 East Chestnut St.
Augusta, ME 04330

Fax: (207) 626-5022
Email: sbernier@maine.edu