# PEACEMAKING PROGRAM OF THE NAVAJO NATION

## Request for Traditional Group Education

**Group Education Services Requested (Check those that apply):**

☐ **Teaching Tradition**

☐ **Presentations / Outreach**

**Judicial District in which Services will be Given: Name of Agency Requesting Services:**

**Requesting Agency's Address:**

**Contact Person (Please include Title):**

**Telephone Number:**

**Email:**

**SERVICE DETAILS**

**PROBLEMS TO BE ADDRESSED/OR FOCUS OF PRESENTATION:**

**TOPIC RECOMMENDED:**

**DATE OF DESIRED SERVICES:**

**TIME OF DESIRED SERVICES:**

**LOCATION OF DESIRED SERVICES:**

### 11 DISTRICT OFFICES

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