

Reviewed By/Date:

Irene Barrineau

Health Promotions & Partnership Administrator

Commonwealth Kealthcare Corporation

Commonwealth of the Northern Mariana Islands 1178 Hinemlu' St. Garapan, Saipan, MP 96950



Director, Public Health Services

Halina Palacios

COO Population Health

Approved By/ Date:

PUBLIC HEALTH SERVICES OUTREACH REQUEST FORM

Please use this form to request outreach and/or presentations from the Commonwealth Healthcare Corporation-Public Health Services. Forms must be submitted 2 to 4 weeks (Saipan) and 4 to 6 weeks (Tinian and Rota) prior to the proposed delivery date of the requested services for appropriate planning and scheduling purposes. If you have a request for services not listed, please note in the section, "Comments regarding your request."

Please submit your completed request form to the following address:

Commonwealth Healthcare Corporation, Garapan, Saipan

1st floor, Public Health Services office, across CHCC Volunteer's Gift Shop

You may also email your completed request form to the Health Promotions and Partnerships Unit, at irene.barrineau@chcc.health

Requester's Information:	
Gov't Agency/ Group/ Organization:	
Point of Contact Name:	
Position Title:	
Contact #:	Email:
Please select the type of service(s) requested:	
Presentation(s)	Resources and/or Informational Exhibit
Topics of interest (select from below)	Health Screening (Blood Pressure/Sugar)
Basic Nutrition	
Preventative Health Screening ft CHCC CARES	S Program
Tobacco and Betelnut Cessation Info	
Reproductive Health	
Public Health Services Overview	
Other:	
Name of your Event/Activity (health fair, seminar, work	(shop, other):
Date/Time:	Location:
Anticipated Audience Size (# of attendees/ estimate #):	Anticipated Audience Age Group:
Comments regarding your request:	
DO NOT FILL THIS SPACE. FOR CHCC OFFICE USE ONLY	
Received By/Date:	Approved By/ Date:
•	Heather Pangelinan
HPP Point of Contact:	