



Community Security

An initiative of the Center for Jewish Philanthropy of Greater Phoenix



Site Visit Request Form***

Please use this form to request a site visit for your organization. Complete all fields and send as an attachment to security@phoenixcjp.org.

General Information

Institution Name _____

Type of Institution: (School/Daycare/Other) _____

Address _____

Contact Information

Contact Person _____

Position _____

Phone Number _____

Email Address _____

Institution Details

Number of Students _____

Number of Staff/Employees _____

Connected to Other Buildings or Businesses: (Yes/No) _____

If yes, please specify _____

Public Parking Available: (Yes/No) _____

Religious Services Held on Premises: (Yes/No) _____

If yes, specify frequency: _____

Hours of Operation

Weekdays _____

Weekends _____



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Preferred Dates for Site Visit

First Choice _____

Second Choice _____

Please describe the purpose of this site visit and include any additional, relevant information.

I/We consent to the evaluation of our premises based on the details provided and understand that this is a preliminary step to determine qualification for [Specify Purpose or Program].

Name of Authorized Person _____

Signature _____

Date _____

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