

**Domestic Violence Education Class**  
Participant Agreement

Welcome to Family Abuse Center’s Domestic Violence Education Class! We hope by attending this class that you will gain useful knowledge and skills for surviving domestic violence. Please read and sign this form which explains the conditions for participating in this class.

1. I understand that for safety reasons the person I have identified as abusive, is not permitted to attend this class with me, or know of the location of where my class is being provided; as signed and agreed upon in the address confidentiality statement.
2. I understand that to receive credit for participating in this Domestic Violence Education Class, I must attend all scheduled classes. Also, I understand if I am more than 15 minutes late or leave more than 15 minutes early, I will have to reschedule my appointment.
3. I understand there are rules and expectations for participating in this class that will be communicated at the beginning of each class. I understand that if I do not abide by these rules and expectations I may be asked to leave and, based on the discretion of the facilitator(s), may or may not be permitted to return
4. I understand that absences exceeding two missed classes without contacting the class facilitator will result in termination of services. If this situation occurs, I understand that I will have to restart the Domestic Violence Education Class curriculum from lesson 1.
5. I understand that children of any age are not permitted in class. If childcare falls through on the date and time of my class, I will contact the Domestic Violence Education Class facilitator to reschedule the class.
6. I understand that once I successfully complete the mandated amount of classes, I will receive a letter of completion.
7. I have received a copy of this agreement.

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Participant Printed Name Date  
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Participant Signature  
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CPS Worker Name