

## FOIA Request

**From:** Nell McClendon

**Request:**

1. Name the Sponsoring Organization of this Trauma Project.
2. Names the Resilience Team to secure funding for this project.
3. Who or what district has Ownership of this Documentary?
4. What are the guidelines for a student to participate in this system and who determines the student participation?
5. Is or will there be a cost for other school districts to participate in this endeavor?
6. Who is the owner/ owners of the Dental & Asthma Vans?
7. Have or will this project cost SD 132, if so, how much?

**Response:**

1. Name the Sponsoring Organization of this Trauma Project.

**Partnership for Resilience**

2. Names the Resilience Team to secure funding for this project.

**No Permission to disclose names**

3. Who or what district has Ownership of this Documentary?

**Partnership for Resilience**

4. What are the guidelines for a student to participate in this system and who determines the student participation?

**Parent Consent**

5. Is or will there be a cost for other school districts to participate in this endeavor?

**No cost**

6. Who is the owner/ owners of the Dental & Asthma Vans?

**Mobile Care Chicago**

7. Have or will this project cost SD 132, if so, how much?

**No cost to the District**