



TEXAS ALCOHOLIC BEVERAGE COMMISSION

Texans Helping Businesses & Protecting Communities

HUMAN TRAFFICKING TRAINING REQUEST FORM

Duty to Prevent Human Trafficking

TABC and the alcoholic beverage industry have a duty to prevent human trafficking (aka modern-day slavery) at licensed and permitted locations in Texas. To do this, we must all become the eyes and ears of Texas, making it near impossible for human trafficking operations to escape notice and the full force of the law.

The Training

TABC offers a **half-hour training session on how to identify and anonymously report suspected human trafficking**. This is tailored for personnel who have a presence in various alcohol retail establishments (on and off-premise sales) and who frequently observe and/or interact with patrons and employees of such establishments.

TABC law enforcement personnel will conduct the training for your staff at your place of business at a date and time convenient to you.

What We Need from You

If interested in receiving training for your personnel, please fill in the blanks below – identifying all of your business locations at which you would like TABC to train your staff and the accompanying information needed for each location.

TABC will connect your location contacts with the appropriate TABC trainer to confirm the details for your training session(s).

Business Name: _____

Location #1

Address: _____

Contact Name: _____

Contact Phone: _____

Contact Email: _____

Preferred Training Date(s): _____

Training Time (*5:00 AM is the earliest training time*): _____

Anticipated Audience Size: _____

Display Capabilities (*TABC must connect a USB drive OR a Microsoft SurfacePro to your display system*): _____

Location #2

Address: _____

Contact Name: _____

Contact Phone: _____

Contact Email: _____

Preferred Training Date(s): _____

Training Time (*5:00 AM is the earliest training time*): _____

Anticipated Audience Size: _____

Display Capabilities (*TABC must connect a USB drive OR a Microsoft SurfacePro to your display system*): _____

Location #3

Address: _____

Contact Name: _____

Contact Phone: _____

Contact Email: _____

Preferred Training Date(s): _____

Training Time (*5:00 AM is the earliest training time*): _____

Anticipated Audience Size: _____

Display Capabilities (*TABC must connect a USB drive OR a Microsoft SurfacePro to your display system*): _____

Check this box if you have additional locations at which you would like TABC to conduct trainings. *If checked, please send a separate email to Stakeholder@tabc.texas.gov with your additional location information.*

Submit this form to Stakeholder@tabc.texas.gov by clicking the “Submit” button. You may need to download and save this document to your computer to submit.