



nami

Missouri

National Alliance on Mental Illness

Family Support Group Facilitator Training Application

Training will be held at the Best Western Capital Plus Inn in Jefferson City September 7-8, 2019.

Name to print on name tag and certificate

Address

City, state, zip

Cell

Email

Are you a NAMI speaker, teacher, mentor or support group facilitator? Yes No

If yes, describe:

Have you attended a NAMI Family Support Group (FSG)? Yes No

Are you a member of NAMI? Yes No

Are you able to travel to Jefferson City to the Family Support Group Facilitator training? Yes No

Are you willing to complete necessary reports/ paperwork? Yes No

Do you have any dietary restrictions or allergies? Yes No If yes, describe:

Will you need an accessible room? Yes No

Would you prefer to share a room? Yes No If yes, name:

Please answer the following questions. You may use the back of this form or another piece of paper, if necessary.

1. Describe why you would like to become a Support Group Facilitator.

2. Describe your experience as a family member of a person with a mental health condition or mental illness.

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NAMI Family Support Group Facilitator Application (continued)

3. Describe your work/ volunteer experience and/ or qualifications.

Facilitator Job Requirements

Please review/ check all requirements:

Willing to attend training to become a NAMI Family Support Group Facilitator

Willing to adhere to NAMI Family Support Group model

Commitment to facilitate a support group

Ability to submit reporting data as necessary to support grant requirements

Positive regard for/ personal experience with support

Please initial all statements:

(initial) I have read and understand the NAMI Family Support Group Facilitator job requirements listed above.

(initial) I am or can become a NAMI member (\$5 Open Door memberships are available.)

(initial) I understand that my attendance at Facilitator Training does not guarantee that I will be certified as a NAMI Family Support Group Facilitator

(initial) By attending the NAMI Family Support Group Facilitator Training and receiving certification as a facilitator, I acknowledge my interest in facilitating a support group.

Date

Signature
(typed or electronic signature ok)

Please email, mail or fax the completed application to:
NAMI Missouri, 3405 West Truman Blvd. #102, Jefferson City, MO 65109
Email info@namimissouri.org | Fax (573) 761-5636 | Call (573) 634-7727

Application deadline: August 5, 2019