



NAMI Homefront 2018 Teacher Training Application & Agreement

TRAINING LOCATION: Yakima, WA

APPLICATION DEADLINE:

Friday, March 2, 2018

2-DAY TRAINING SCHEDULE

Saturday, March 17, 2018 9:00 AM – 7:30 PM

Sunday, March 18, 2018 9:00 AM – 5:00 PM

What is the NAMI Homefront program?

NAMI's Homefront class is a 6-session educational program for families, caregivers and friends of military service members and vets with mental health conditions. Based on the nationally recognized NAMI Family-to-Family program, NAMI Homefront is designed to address the unique needs of family, caregivers and friends of those who have served or are currently serving our country.

What will I learn from the training?

Participants will learn the necessary skills to conduct a rigorous and effective 6-week course in your community. Topics covered in the training include critical information and strategies related to care giving, incorporating presentations, discussions and exercises. This helps provide the necessary tools for a better understanding of the individual living with mental illness. This class uses a guided group process to help families gain practical insight, obtain important information about research and resiliency along with increasing their emotional learning skills.

Homefront Teacher Requirements

To be a successful NAMI Homefront teacher, you need to respond to others in a non-judgmental way, you need to be a good listener with an empathetic ear, and you need to be willing to talk about your experience as a family member of someone living with a mental illness and you will need to be a family member of a service member/veteran living with mental illness.

Trainees agree to attend the entire class. Trainees must demonstrate the qualifications needed to become a good NAMI teacher by the end of training. Trainees may be asked to improve their skills in particular key areas and repeat the training before they may become certified. All applicants will participate in a phone screening interview with the class leaders prior to being accepted into the class. Minimum age to become a Homefront teacher is 18 years old.

What is required of me after I take the training?

By taking this teacher training you are committed to co-teaching the Homefront class, consisting of 6 weeks of material, at least twice in a 24-month period in cooperation with our local NAMI affiliate.

You will need to register and interview all prospective students before the class. Each weekly class requires a lot of pre-class preparation. In some affiliates, the teacher also needs to find a location for the classes and take care of advertising and publicity. You will be required to send periodic reports to State and National for their recordkeeping and upload data into the National NAMI Education Data tracking program. The classes involve reading aloud from NAMI course materials so applicants need to be comfortable with this.

Registration Information

NAMI Washington will pay for meals, snacks, lodging and all training materials. Your NAMI affiliate is asked to cover your travel and other expenses that you may incur to attend this training. Lodging will be at a hotel in Kirkland and is **double occupancy**. If you require single occupancy, arrangements will need to be made prior to attendance by the attendee and there will be additional costs which will be the responsibility of the attendee. In order to reserve a space a \$50 refundable registration deposit **from your affiliate** is required at the time of registration. **If you need to cancel after being accepted, notify Dorina Hyseni at the state office 206-783-4288 or dorina@namiwa.org no later than March 12, 2018** so we can fill your spot, or your affiliate will lose its \$50 registration deposit. Cancelled spots are filled with applications from the waiting list for the class, not by sending another affiliate member.



APPLICATION FOR NAMI HOMEFRONT TEACHER TRAINING: March 17-18, 2018

APPLICATION DUE BY: March 2, 2018

Applications received after 5:00 pm on the due date will be put on a wait list

Applicant Name: _____ Preferred Pronouns: _____

NAMI Affiliate: _____

Today's Date: _____ Date of Birth: _____

Address: _____

City: _____ Zip: _____

Primary Phone Number: _____ Best time to call: _____

Alternate Phone Number: _____ Best time to call: _____

E-mail: _____

Best way to reach you: Phone Email Remember, the interview must be completed by Phone.

Emergency Contact Name: _____

➤ Area Code/Phone: _____

Do you have any accessibility needs, dietary restrictions, or other issues which need accommodation during training?

Will you be bringing a service animal? Yes No

Homefront training begins Saturday at 9:00 AM. Those who are further than 1 hour away are provided lodging and will want to consider arriving Friday evening (don't forget I-5 traffic snarls!). Please complete the following information:

- I live within 1 hour driving distance of the training site and will not need accommodations
- I will need housing for the following nights: Friday Saturday

NAMI-WA will try to accommodate Roommate requests (check one):

- Please assign roommate
 - What is your gender (identity or expression)? _____
 - I would like a room with _____

- I would like a single room and understand I, the attendee, will be responsible for the additional amount and will be billed by NAMI Washington 3 weeks after the training is complete.

Please answer the following questions:

1. Are you a NAMI member? Yes No Do you have a nami.org login/password? Yes No

2. How did you hear about this training class? _____

1. Have you ever been convicted of a crime against another person including but not limited to: assault of any kind, harassment of any kind, or stalking?
Yes No **IF YES, PLEASE USE AN ADDITIONAL PIECE OF PAPER TO EXPLAIN THE ISSUE AND CURRENT STATUS IN DETAIL.**
2. Are you a family member of a service member/veteran living with mental illness?
Yes No
(Note: You must be a first-degree relative to be a Homefront teacher, or have lived in a household with a service member/veteran relative with mental illness for a significant period of time)
 ➤ Your ill relative is your (spouse, sister, etc): _____
 ➤ Your relative's diagnosis is: _____
3. Have you completed the NAMI Family to Family Course?
Yes No
(It is not required that you have completed the NAMI Family-to-Family Course in order to be qualified to become a Homefront teacher, but it is preferred)
4. Have you taken other NAMI classes or trainings?
Yes No
 If yes, please list: _____

5. Are you currently certified to teach/lead any other NAMI Signature Programs?
Yes No **If yes, please list all Signature Programs you are certified to lead:** _____

6. Please briefly describe why you want to become a Homefront teacher; please include information about your lived experience with mental illness (please attach additional paper as needed):

7. Do you know with whom you want to Co-teach? Yes No If yes, who? _____

8. Do you know where you want to teach? Yes No if yes, where? _____

Performance Agreement for NAMI Homefront Teacher Trainees

- I understand that I must be a current NAMI member, or join NAMI by the due date on this application.
- I am first-degree relative of an active duty/veteran individual living with mental illness, or I have lived in a household for a significant period of time with an active duty/veteran family member living with a mental illness.
- I will commit to arriving at the training on time, and to completing both days of this training (Sat 9:00 AM – 7:30 PM, Sun 9:00 AM – 5:00 PM).
- I understand that I am required to stay for the entire training to receive a certificate of completion. Further, I understand that if I do not stay for the entire training, I will be required to re-take the entire training again to receive the certificate of completion.
- I understand that even if I complete the entire training, I am not guaranteed being awarded the certificate of completion that indicates that I am a certified NAMI Homefront teacher. That is, I understated that skills will be evaluated by the NAMI Washington State Trainers, and they will decide if I have mastered the skills necessary to be an effective Homefront Teacher.**
- By applying to participate in the Homefront Teacher Training, I am indicating my willingness to abide by all Homefront program policies, and to teach all Homefront classes with complete fidelity to the approved curriculum.
- By applying to participate in the Homefront Teacher Training, I am agreeing to teach at least one complete Homefront course within 1 year of my training, and to teach at least one more course within 2 years of my training.
- I will communicate promptly with the NAMI Washington state office, as requested or required, and will submit all forms and data to the state and national offices, as required by a Homefront Teacher.
- I will work to identify potential Homefront teacher-candidates who participate in my classes, so that my local affiliate will be able to educate more family members in my community.
- I will regularly encourage my class participants to become NAMI members so that my local affiliate and NAMI Washington can continue to offer support and education to members of my community.

Note: Applicants will be contacted for a brief telephone interview prior to being accepted into the training.

Applicant Signature _____ Date _____

**This final section must be completed by the affiliate executive director, president or vice president
In addition, a letter of reference from an Affiliate Leader must be included**

- This person is a current member of our affiliate. Membership Expiration Date _____
- This person meets the requirements to attend this training per the NAMI Washington Training & Education Program Guidelines for 2018, and has the qualities to be a successful teacher/presenter/facilitator.
- Our affiliate will work with this person to initiate or continue this program during the next year.
- I have had a conversation with the applicant about their commitment and responsibilities to our affiliate.
- I have arranged transportation to the training for this applicant.
- A deposit of \$50.00, payable to NAMI Washington, for each applicant is enclosed. We understand that the deposit will be returned to our affiliate if this individual successfully completes the entire training.
- I understand that this training is on a first come, first serve basis after the completed application and deposit has been received in the NAMI WA office. Where necessary, priority will be given to areas with critical need.

- This affiliate has submitted all 2017 Education Data to the NAMI Data Collection Site. I understand that no affiliates from our affiliate will be able to participate in a State Training if our Education Data has not been uploaded.
- This affiliate is up to date with submission of all 2018 Education Data to the NAMI Data Collection Site.

NAME and TITLE of NAMI Affiliate Leader (printed): _____

Name of NAMI Affiliate: _____

Signature: _____ Date: _____

Email of Affiliate Leader: _____ Phone Number: _____

Keep a copy for your records and send this completed and signed application with your \$50 deposit. If your affiliate is sending more than one attendee please send a separate \$50 check with each application. We will return all checks within 3 weeks of completion of the training, unless the applicant fails to attend the training without notification of cancellation by March 12, 2018.

Return Applications to: NAMI Washington 1107 NE 45th St., Suite 230, Seattle, WA 98105
Or submit via email to: dorina@namiwa.org