**Crisis Intervention Partners (CIP) Trainings in Wood County**

**Registration and Application Form**

* June 19-20, 2017 8am-4pm

MSTC in Wisconsin Rapids, 500 32nd Street N, Wisconsin Rapids, WI 54494

* June 26-27, 2017 8am-4pm

Wildwood Station, 1800 S. Roddis Avenue, Marshfield, WI 54449

Wood County Human Services – Crisis/Legal Services is hosting Crisis Intervention Partners training. This is a two-day 16-hour **free** training designed for wide ranging audiences who are interested in better understanding and improving interactions with people who experience mental health crises. CIP is designed for and dedicated to individuals who work in professions related to crisis services (i.e. corrections officers, EMS personnel, fire fighters, social workers, community crisis intervention oriented, or educators, hospital and emergency room personnel, etc.).

**Program Learning Goals for CIP**

1. Basic education on human development & the impact of trauma.
2. Presentation & discussion with person living with mental illness.
3. Education on safe, effective, crisis de-escalation and active listening skills.
4. Self-care, building support networks, and resiliency.
5. Interactive role-plays on crisis de-escalation with feedback from trainers.
6. Auditory hallucination (hearing voices) simulations.
7. QPR-Suicide Prevention.

**Please fill out the application on the next page and return to the email address provided.**

**Please do not delay – Space is limited.**

**Application Form for Crisis Intervention Partners Training**

Please submit this application to Dawn Schmutzer at [dschmutzer@co.wood.wi.us](mailto:dschmutzer@co.wood.wi.us) by **June 12, 2017.**

For questions, please contact**:** Katie Czys, Legal Services/Crisis Supervisor – [kczys@co.wood.wi.us](mailto:kczys@co.wood.wi.us) or

(715) 421-8881.

Name & Title: \_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Session Attending (circle one): June 19-20 June 26-27

Agency: \_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Agency Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Agency Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Please describe briefly why you are interested in attending CIP Training (personal interest, assigned by supervisor, to develop skills, etc.):*

*Please list some of the questions you have or topics you hope will be covered in this class:*