

July 2008 NSO Training Registration Form

Participant Name: _____ Social Work License # or Security Number: _____
(Print exact name as it will appear on certificate) (Mandatory for DCS & CEU certificates)

Business Name: _____ Phone # () - _____ - _____

Business Address: _____ Fax # () - _____ - _____

City: _____ Zip Code: _____ Email Address: _____

Use a separate form for each individual.

TRAINING SITE: Unless otherwise noted, all training will take place at the Michigan Building, 220 Bagley – 10th Floor
 Detroit, MI 48226.

(Please check line to left of each date)

DCS Training
Note:
**(Pre-requisition requirements)*
 Students must take **WWP1 (Both days)** before taking **WWP2**.
 Students must take **Health (Both days)** before taking **Medication**.

DCS MODULES

<input type="checkbox"/> Tuesday	07/01/08	1:00pm – 5:00pm	Infant and Child CPR	(\$30)
<input type="checkbox"/> Tuesday	07/08/08	9:00am – 4:30pm	Health 1	(\$60)
<input type="checkbox"/> Wednesday	07/09/08	9:00am – 4:30pm	Health 2	(\$60)
<input type="checkbox"/> Tuesday	07/15/08	9:00am – 4:30pm	*Medication 1	(\$60)
<input type="checkbox"/> Wednesday	07/16/08	9:00am – 4:30pm	*Medication 2	(\$60)
<input type="checkbox"/> Tuesday	07/29/08	9:00am – 4:00pm	*Medication Renewal	(\$60)

CONTINUING EDUCATION MODULES

<input type="checkbox"/> Monday	07/07/08	9:00am – 12:00pm	Intro to IDDT	(\$35)
<input type="checkbox"/> Monday	07/07/08	1:00pm – 4:00pm	Intro to Assessment & Treatment of SA	(\$35)
<input type="checkbox"/> Monday	07/14/08	9:00am – 12:00pm	Intro to Psychotic Disorders	(\$35)
<input type="checkbox"/> Monday	07/14/08	1:00pm – 4:00pm	Intro to Mood Disorders	(\$35)
<input type="checkbox"/> Wednesday	07/16/08	6:00pm – 8:00pm	Financial Literacy OPEN HOUSE	(\$FREE)
<input type="checkbox"/> Friday	07/18/08	9:00am – 4:00pm	Ethics Amid Excess	(\$70)
<input type="checkbox"/> Tuesday	07/22/08	9:00am – 4:00pm	Motivational Interviewing	(\$70)
<input type="checkbox"/> Wednesday	07/23/08	1:00pm – 5:00pm	Stages of Change	(\$45)
<input type="checkbox"/> Thursday	07/24/08	10:00am – 2:00pm	Non-Violent Crisis Intervention	(\$30)
<input type="checkbox"/> Friday	07/25/08	9:00am – 12:00pm	Spirituality in Children	(\$35)
<input type="checkbox"/> Wednesday	07/30/08	9:00am – 12:00pm	Intro to Post Traumatic Stress Disorders	(\$35)

Note: Please call 48 hours in advance to cancel. No shows will be billed for the **FULL** charge.
 Participants who arrive more than 15 minutes after start of class will not be admitted to class.



Confirmation



RETURN/FAX THIS FORM TO:
 Training Department
 Neighborhood Services Organization
 220 Bagley Avenue—Suite 1200
 Detroit, MI 48226
Phone: (313) 967-5446
Fax: (313) 964-6366

August 2008 NSO Training Registration Form

Participant Name: _____ Social Work License # or Security Number: _____
(Print exact name as it will appear on certificate) (Mandatory for DCS & CEU certificates)

Business Name: _____ Phone # (____) - _____ - _____

Business Address: _____ Fax # (____) - _____ - _____

City: _____ Zip Code: _____ Email Address: _____

Use a separate form for each individual.

TRAINING SITE: Unless otherwise noted, all training will take place at the Michigan Building, 220 Bagley – 10th Floor
 Detroit, MI 48226.

(Please check line to left of each date)

DCS Training

Note:
 *(Pre-requisition requirements)

Students must take **WWP1 (Both days)** before taking **WWP2**.

Students must take **Health (Both days)** before taking **Medication**.

DCS MODULES

<input type="checkbox"/> Tuesday	08/05/08	9:00am – 4:30pm	Introduction	(\$60)
<input type="checkbox"/> Wednesday	08/06/08	9:00am – 12:00pm	First Aid	(\$30)
<input type="checkbox"/> Wednesday	08/06/08	1:00pm – 4:30pm	CPR	(\$30)
<input type="checkbox"/> Thursday	08/07/08	9:00am – 4:30pm	Working With People 1	(\$60)
<input type="checkbox"/> Friday	08/08/08	9:00am – 12:00pm	Working With People 1	(\$30)
<input type="checkbox"/> Friday	08/08/08	1:00pm – 4:30pm	Environmental Emergencies	(\$30)
<input type="checkbox"/> Tuesday	08/12/08	9:00am – 4:30pm	Health 1	(\$60)
<input type="checkbox"/> Wednesday	08/13/08	9:00am – 4:30pm	Health 2	(\$60)
<input type="checkbox"/> Thursday	08/14/08	9:00am – 4:30pm	*Working With People 2	(\$60)
<input type="checkbox"/> Friday	08/15/08	9:00am – 12:00pm	*Working With People 2	(\$30)
<input type="checkbox"/> Friday	08/15/08	1:00pm – 4:30pm	Nutrition	(\$30)
<input type="checkbox"/> Tuesday	08/19/08	9:00am – 4:30pm	* Medication 1	(\$60)
<input type="checkbox"/> Wednesday	08/20/08	9:00am – 4:30pm	* Medication 2	(\$60)

CONTINUING EDUCATION MODULES

<input type="checkbox"/> Friday	08/01/08	9:00am – 4:30pm	Adv. Gambling -Depression & Gambling	(\$90)
<input type="checkbox"/> Monday	08/04/08	9:00am – 12:00pm	Cultural Competency	(\$35)
<input type="checkbox"/> Monday	08/04/08	1:00pm – 4:00pm	Schizophrenia, Psychosis & Addiction	(\$35)
<input type="checkbox"/> Monday	08/18/08	9:00am – 12:00pm	Co-Occurring Disorders	(\$35)
<input type="checkbox"/> Friday	08/22/08	9:00am – 12:00pm	Adolescent Development in the 21st Century	(\$35)
<input type="checkbox"/> Monday	08/25/08	9:00am – 12:00pm	Balancing Work & Family in Recovery	(\$35)
<input type="checkbox"/> Wednesday	08/27/08	9:00am – 12:00pm	Toxic Relationships	(\$35)
<input type="checkbox"/> Thursday	08/28/08	10:00am – 2:00pm	Non-Violent Crisis Intervention	(\$30)

Note: Please call 48 hours in advance to cancel. No shows will be billed for the **FULL** charge. Participants who arrive more than 15 minutes after start of class will not be admitted to class.

Association of
 Social Work Board
 Approved
 Continuing
 Education
 Provider #1144

Confirmation



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September 2008 NSO Training Registration Form

Participant Name: _____ Social Work License # or Security Number: _____
(Print exact name as it will appear on certificate) (Mandatory for DCS & CEU certificates)

Business Name: _____ Phone # () - _____ - _____

Business Address: _____ Fax # () - _____ - _____

City: _____ Zip Code: _____ Email Address: _____

Use a separate form for each individual.

TRAINING SITE: Unless otherwise noted, all training will take place at the Michigan Building, 220 Bagley – 10th Floor
 Detroit, MI 48226.

(Please check line to left of each date)

DCS Training Note:
 *(Pre-requisition requirements)

Students must take **WWP1 (Both days)** before taking **WWP2.**

Students must take **Health (Both days)** before taking **Medication.**

DCS MODULES

<input type="checkbox"/> Tuesday	09/09/08	9:00am – 4:30pm	Introduction	(\$60)
<input type="checkbox"/> Thursday	09/11/08	9:00am – 4:30pm	Working With People 1	(\$60)
<input type="checkbox"/> Friday	09/12/08	9:00am – 12:00pm	Working With People 1	(\$30)
<input type="checkbox"/> Friday	09/12/08	1:00pm – 4:30pm	Environmental Emergencies	(\$30)
<input type="checkbox"/> Tuesday	09/16/08	9:00am – 4:30pm	Health 1	(\$60)
<input type="checkbox"/> Wednesday	09/17/08	9:00am – 4:30pm	Health 2	(\$60)
<input type="checkbox"/> Thursday	09/18/08	9:00am – 12:00pm	First Aid	(\$30)
<input type="checkbox"/> Thursday	09/18/08	1:00pm – 4:30pm	CPR	(\$30)
<input type="checkbox"/> Tuesday	09/23/08	9:00am – 4:30pm	*Medication 1	(\$60)
<input type="checkbox"/> Wednesday	09/24/08	9:00am – 4:30pm	*Medication 2	(\$60)
<input type="checkbox"/> Thursday	09/25/08	9:00am – 4:30pm	*Working With People 2	(\$60)
<input type="checkbox"/> Friday	09/26/08	9:00am – 12:00pm	*Working With People 2	(\$30)
<input type="checkbox"/> Friday	09/26/08	1:00pm – 4:30pm	Nutrition	(\$30)

CONTINUING EDUCATION MODULES

<input type="checkbox"/> Wednesday	09/03/08	9:00am – 12:00pm	Addiction & Older Adults	(\$35)
<input type="checkbox"/> Friday	09/05/08	9:00am – 12:00pm	Psychotropics	(\$35)
<input type="checkbox"/> Friday	09/05/08	1:00pm – 4:00pm	Pain Management	(\$35)
<input type="checkbox"/> Monday	09/08/08	9:00am – 4:00pm	Ethics Amid Excess	(\$70)
<input type="checkbox"/> Monday	09/15/08	9:00am – 12:00pm	Group Therapy	(\$35)
<input type="checkbox"/> Monday	09/15/08	1:00pm – 4:00pm	Mood Disorders & Addiction	(\$35)
<input type="checkbox"/> Friday	09/19/08	8:30am – 5:00pm	Basic Gambling Training Day 1	(\$85)
<input type="checkbox"/> Saturday	09/20/08	8:30am – 5:00pm	Basic Gambling Training Day 2	(\$85)
<input type="checkbox"/> Monday	09/22/08	9:00am – 12:00pm	Stress & Addiction	(\$35)
<input type="checkbox"/> Monday	09/29/08	9:00am – 12:00pm	Spirituality in Recovery	(\$35)
<input type="checkbox"/> Monday	09/29/08	1:00pm – 4:00pm	Sexuality in Recovery	(\$35)

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October 2008 NSO Training Registration Form

Participant Name: _____ Social Work License # or Security Number: _____
(Print exact name as it will appear on certificate) (Mandatory for DCS & CEU certificates)

Business Name: _____ Phone # () - - _____

Business Address: _____ Fax # () - - _____

City: _____ Zip Code: _____ Email Address: _____

Use a separate form for each individual.

TRAINING SITE: Unless otherwise noted, all training will take place at the Michigan Building, 220 Bagley – 10th Floor Detroit, MI 48226.

(Please check line to left of each date)

DCS Training

Note:
 *(Pre-requisition requirements)

Students must take **WWP1 (Both days)** before taking **WWP2.**

Students must take **Health (Both days)** before taking **Medication.**

DCS MODULES

<input type="checkbox"/> Wednesday	10/01/08	1:00pm – 5:00pm	Infant and Child CPR	(\$30)
<input type="checkbox"/> Wednesday	10/08/08	9:00am – 4:00pm	*Medication Renewal	(\$60)
<input type="checkbox"/> Tuesday	10/14/08	9:00am – 4:30pm	Health 1	(\$60)
<input type="checkbox"/> Wednesday	10/15/08	9:00am – 4:30pm	Health 2	(\$60)
<input type="checkbox"/> Tuesday	10/21/08	9:00am – 4:30pm	*Medication 1	(\$60)
<input type="checkbox"/> Wednesday	10/22/08	9:00am – 4:30pm	*Medication 2	(\$60)

CONTINUING EDUCATION MODULES

<input type="checkbox"/> Friday	10/03/08	9:00am – 12:00pm	Treating Troubled Adolescents	(\$35)
<input type="checkbox"/> Friday	10/10/08	9:00am – 4:00pm	Motivational Interviewing	(\$70)
<input type="checkbox"/> Friday	10/24/08	8:30am – 5:00pm	Basic Gambling Training Day 3	(\$85)
<input type="checkbox"/> Saturday	10/25/08	8:30am – 5:00pm	Basic Gambling Training Day 4	(\$85)
<input type="checkbox"/> Friday	10/24/08	1:00pm – 4:00pm	Art Therapy - An Overview of Creative Expression With Developmentally Disabled, Substance Abuse, Older Adults & Homeless Populations	(\$35)
<input type="checkbox"/> Wednesday	10/29/08	1:00pm – 4:00pm	Trendy Drugs & Paraphernalia	(\$35)
<input type="checkbox"/> Thursday	10/30/08	10:00am – 2:00pm	Non-Violent Crisis Intervention	(\$30)

Note: Please call 48 hours in advance to cancel. No shows will be billed for the **FULL** charge. Participants who arrive more than 15 minutes after start of class will not be admitted to class.



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November 2008 NSO Training Registration Form

Participant Name: _____ Social Work License # or Security Number: _____
(Print exact name as it will appear on certificate) (Mandatory for DCS & CEU certificates)

Business Name: _____ Phone # (____) - _____ - _____

Business Address: _____ Fax # (____) - _____ - _____

City: _____ Zip Code: _____ Email Address: _____

Use a separate form for each individual.

TRAINING SITE: Unless otherwise noted, all training will take place at the Michigan Building, 220 Bagley – 10th Floor
 Detroit, MI 48226.

(Please check line to left of each date)

DCS Training

Note:
 *(Pre-requisition requirements)

Students must take **WWP1 (Both days)** before taking **WWP2.**

Students must take **Health (Both days)** before taking **Medication.**

DCS MODULES

<input type="checkbox"/> Tuesday	11/04/08	9:00am – 4:30pm	Introduction	(\$60)
<input type="checkbox"/> Wednesday	11/05/08	9:00am – 12:00pm	First Aid	(\$30)
<input type="checkbox"/> Wednesday	11/05/08	1:00pm – 4:30pm	CPR	(\$30)
<input type="checkbox"/> Thursday	11/06/08	9:00am – 4:30pm	Working With People 1	(\$60)
<input type="checkbox"/> Friday	11/07/08	9:00am – 12:00pm	Working With People 1	(\$30)
<input type="checkbox"/> Friday	11/07/08	1:00pm – 4:30pm	Environmental Emergencies	(\$30)
<input type="checkbox"/> Tuesday	11/11/08	9:00am – 4:30pm	Health 1	(\$60)
<input type="checkbox"/> Wednesday	11/12/08	9:00am – 4:30pm	Health 2	(\$60)
<input type="checkbox"/> Thursday	11/13/08	9:00am – 4:30pm	*Working With People 2	(\$60)
<input type="checkbox"/> Friday	11/14/08	9:00am – 12:00pm	*Working With People 2	(\$30)
<input type="checkbox"/> Friday	11/14/08	1:00pm – 4:30pm	Nutrition	(\$30)
<input type="checkbox"/> Tuesday	11/18/08	9:00am – 4:30pm	*Medication 1	(\$60)
<input type="checkbox"/> Wednesday	11/19/08	9:00am – 4:30pm	*Medication 2	(\$60)

CONTINUING EDUCATION MODULES

<input type="checkbox"/> Friday	11/07/08	9:00am – 4:30pm	Adv. Gambling- Axis II—Dr. Lori Rugle (Lansing, MI)	(\$90)
<input type="checkbox"/> Wednesday	11/26/08	10:00am – 2:00pm	Non-Violent Crisis Intervention	(\$30)

Note: Please call 48 hours in advance to cancel. No shows will be billed for the **FULL** charge. Participants who arrive more than 15 minutes after start of class will not be admitted to class.



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Fax: (313) 964-6366

December 2008 NSO Training Registration Form

Participant Name: _____ Social Work License # or Security Number: _____
(Print exact name as it will appear on certificate) (Mandatory for DCS & CEU certificates)

Business Name: _____ Phone # (____) - _____ - _____

Business Address: _____ Fax # (____) - _____ - _____

City: _____ Zip Code: _____ Email Address: _____

Use a separate form for each individual.

TRAINING SITE: Unless otherwise noted, all training will take place at the Michigan Building, 220 Bagley – 10th Floor
 Detroit, MI 48226.

DCS Training
Note:
**(Pre-requisition requirements)*

Students must take **WWP1 (Both days)** before taking **WWP2**.

Students must take **Health (Both days)** before taking **Medication**.

(Please check line to left of each date)

DCS MODULES					
____	Monday	12/15/08	9:00am – 12:00pm	First Aid	(\$30)
____	Monday	12/15/08	1:00pm – 4:30pm	CPR	(\$30)
____	Tuesday	12/16/08	9:00am – 4:00pm	*Medication Renewal	(\$60)
CONTINUING EDUCATION MODULES					
____	Friday	12/19/08	10:00am – 2:00pm	Non-Violent Crisis Intervention	(\$30)

Note: Please call 48 hours in advance to cancel. No shows will be billed for the **FULL** charge. Participants who arrive more than 15 minutes after start of class will not be admitted to class.

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