

Gentle Teaching: Working With People

Trainers:

Elizabeth Wygant, LBSW, QMRP
Jennie Darnell, BA, LBSW, QMRP
Michele Pascoe, LBSW, QMRP

You will learn how to:

- ◆ Facilitate entry level training Working with People on Gentle Teaching Basis
- ◆ Evaluate entry level skills of participants in application of central purpose, pillars and tools
- ◆ Incorporate principles of Gentle Teaching into all aspects of work and life

Topics to be discussed:

- ◆ Gentle Care Giving
- ◆ Pillars & Tools
- ◆ History & Memories
- ◆ Gifts & Vulnerabilities of the caregiver/companion

Date:

January 25th –26th, 2012

Times:

Jan. 25: 9am-4pm

Jan. 26: 9am-12pm
(Registration is at 8:45am)

Cost: \$60.00

(This includes meals and program handouts)

Location:

Calhoun Area Career Center
475 East Roosevelt Ave.
Battle Creek, MI 49017

This training has limited spaces.
**Please register by Monday
January 16th, 2012.**

To register via phone, for more information, or help with directions, please call FOCUS training at 866-412-8767. To register via fax, send completed registration to (269)966-1777 or email at jnl@summitpointe.org

Or mail your registration form to: FOCUS, 140 W. Michigan Ave., Battle Creek, MI 49017.
If you require special needs please contact us by **December 26th, 2011** so that we may accommodate your needs.

**This workshop is approved by the Michigan Social Work Continuing Education
Collaboration for 8.5 CE Clock Hours.**



140 West Michigan Avenue Battle Creek, MI 49017 Phone: 866.412.8767
 Fax: 269.966.1777 www.focustraining.org info@focustraining.org

CORPORATE EDUCATION & TRAINING

Gentle Teaching: Working with People Registration Form

January 25th—26th, 2012

January 25th: 9:00am—4:00pm January 26th: 9:00am—12:00pm
 Registration at 8:45am

Calhoun Area Career Center

475 East Roosevelt Ave.
 Battle Creek, MI 49017

NAME: _____ ORGANIZATION: _____
 ADDRESS: _____ CITY/STATE/ZIP: _____
 PHONE: (____) _____ FAX: (____) _____
 EMAIL: _____ COST: \$60 (Summit Pointe & Venture Staff Free)
 PAYING: CASH CHECK MC / VISA
 CREDIT CARD # _____ EXP: ____/____ Security Code: _____
 Signature: _____ Registration includes materials, refreshments, and lunch.
 Social Work License # _____ Dietary needs: _____

Please complete registration form and fax or mail by

January 16th, 2012 to the following:

Fax: 269-966-1777 Phone: 866-412-8767

Email: jnl@summitpointe.org

or mail to

Focus 140 W. Michigan Ave Battle Creek, MI 49017

If you need special assistance, please contact us at
info@focustraining.org or by phone by December 26, 2011.

If you have any questions please contact us by phone or email.

Please see our website at www.focustraining.org for our
 Cancellation/Refund Policy.

Please make checks payable to: FOCUS