



40-Hour Domestic Violence Counselor Training Monday, June 24 – Friday, June 28, 2019

Objective: To train state-certified domestic violence counselors

- Meets CA Evidence Code 1037.1 for DV counselors
- MFT/LCSW CEUs for the Board of Behavioral Science
- Expert speakers and professional setting
- The course meets the qualifications for 40 hours of continuing education credit for *MFTs and/or LCSWs* as required by California BBS. CAMFT-Approved Provider # 129615

Topics covered:

- History of domestic violence (DV)
- DV victim-counselor privilege
- Civil and criminal law related to DV
- Laws that protect confidentiality of victim records and information
- Peer counseling techniques
- Housing, public assistance and other financial resources available to meet the financial needs of DV victims
- Referral services available to DV victims
- Societal attitudes toward DV
- Cultural Competency

JUNE 2019 Training Dates

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
23	24 MMC 40-Hour DV Training 8:00am – 5:00pm	25 MMC 40-Hour DV Training 8:00am – 5:00pm	26 MMC 40-Hour DV Training 8:00am – 5:00pm	27 MMC 40-Hour DV Training 8:00am – 5:00pm	28 MMC 40-Hour DV Training 8:00am – 5:00pm	29

Training Location: Life Transitions Program

1300 E Shaw Ave. #176, Fresno, CA 93710

For more information, contact Lacey Long-Vejar at lacey@mmcenter.org

40-HOUR TRAINING REGISTRATION FORM - JUNE 2019



Name: _____ Agency: _____ License No.(for CEUs only): _____
Address: _____
Phone #(s): _____ Email: _____

PLEASE CHECK THE BOX THAT APPLIES TO YOU:

- Professional Development** I am enrolling to enhance my professional skills and would like a Domestic Violence Counselor Certificate (meeting EC 1037.1) and have enclosed \$300.
- Batterers' Facilitator's Core Curriculum Training** I am enrolling in this course to get 32 hours toward my 40-hour Batterers' Intervention Program Group Facilitator certification (meeting PC 1203.098) and I understand the additional 8 hours will be scheduled after the completion of the 40 Hour. Total enclosed: \$400
- MMC employee or registered intern/trainee**
- Non-Direct Volunteer** I am committing to serve MMC as a volunteer following the training. I have enclosed \$25. I understand that I must first pass all application and testing procedures, prior to placement.
- Direct Volunteer** I am committing to serve MMC as a volunteer for a minimum of 4 hours per week for 6 months following the training. I have enclosed \$100. I understand that I must first pass all application and testing procedures, prior to placement. I understand that I will receive my Domestic Violence Counselor Certificate (meeting EC 1037.1) as well as **reimbursement of the \$100 fee upon completion of the 6-month commitment.**

1. I understand the importance of attending all sessions in order to receive my certificate. I will be present at all sessions unless illness or emergency should arise, in which case I will notify the facilitator as soon as possible and make up the hours at the next scheduled training. **The cost of making up sessions in future trainings is \$25 per topic hour.**
2. I understand that the topic of domestic violence can elicit strong and sometimes unexpected emotions, and may affect each individual differently. Therefore, I agree to do my part in creating a safe, non-judgmental environment in which each person (with backgrounds, experiences, beliefs, and values that may differ from mine) may participate in his or her own exploration and education about issues related to domestic violence.
3. I understand that returning this application does not guarantee me a spot in the training. It is subject to availability, on a first-come first-served basis.
4. Credit for hours is based on sign-in sheets, so be sure to sign-in and out each time or credit may not be given. MMC reserves the right to refuse to issue participants a Domestic Violence Counselor Certificate.
5. Cancellation Policy: Cancellations must be submitted in writing seven days prior to event for a refund minus a \$25 administration fee. Any cancellations less than 7 days prior will not be issued a refund.

Signature here indicates agreement:

Date:

Form of Payment:

- Money Order Check ____-PO DSS/FSP bill DSS
- Credit Card (MMC will contact you prior to processing payment):
 - Visa MasterCard Amex

Name on card:

Signature:

Card #:

Exp. Date:

I would like a certificate for CEUs (\$25 - LCSW or LMFT ONLY)
Amount enclosed for registration/s: \$

Amount enclosed for CEUs: \$

Total amount enclosed: \$

Please return registration along with payment (payable to Marjaree Mason Center) to:
Marjaree Mason Center
Attention: Lacey Long-Vejar
1600 M Street, Fresno, CA 93721
EMAIL: lacey@mmcenter.org
FAX: (559) 237-0420

SEATING IS LIMITED. TO SECURE YOUR SPOT IN THE TRAINING, PLEASE RETURN YOUR REGISTRATION FORM WITH PAYMENT AS SOON AS POSSIBLE.