



Community Action Opportunities

HELPING PEOPLE. CHANGING LIVES.

North Carolina Family Support Credential Training Application

Application For: "Empowerment Skills for Leaders Course"

Location requested _____

Name: _____ Last 4 digits of S.S. #: _____
Last First

Mailing Address: _____
Street or PO Box City State Zip

County _____ Day Phone #: _____ Evening #: _____
(of residence)

Email address: (WRITE CLEARLY) _____

Agency Affiliation: _____ Job Title (if applicable) _____

Please briefly describe your goal for enrolling in the training and credentialing program

What supports, personal assets and strengths do you have to help you be successful in this 2 to 3 month training and credentialing process? (For example, see this as a priority, agency support, etc.)

I am aware that the training and credentialing program includes: attending 36 hours of classroom training (6 days/1 day every other week); preparing an Independent Learning Project for each chapter, Peer Coaching process to provide mutual support and guidance in planning and evaluating the Independent Learning Projects; submitting a portfolio that demonstrates knowledge and skills gained during the course.

Signature of Applicant

Date

Sponsor/Employer's endorsement, if applicable:

I endorse the above individual's participation in this training program. I agree to release him or her from work to attend and will encourage and support him or her in their commitment to achieve success.

Signature

Title

Date

Send completed application to: *Community Action Opportunities, Attention: Family Support, 25 Gaston Street, Asheville, NC 28801*
Phone: 828-252-2495, FAX 828-253-6319). admin@communityactionopportunities.org. The course fee of \$660 includes the credentialing fee and is due to CAO at the address above by the 1st class session unless sponsorship or other financial arrangements have been made.