



MAINE CAN WORK!

Maine Can Work Facilitator Application

Name:	_____		
Address:	_____	Phone #:	_____
City/State/Zip:	_____		
Email:	_____	Peer/Recovery Center/Program:	_____
Signature:	_____		

Maine Can Work Facilitator responsibilities:

Attend Facilitator Training: ***January 3, 2020 9:00-4:00, Frances Perkins Room, Maine Department of Labor, 45 Commerce Ave, Augusta, ME***

- **Bring your laptop or tablet with you!**
- Participate in monthly conference calls with other Facilitators
- Deliver all modules (seven) of Maine Can Work at least annually
- Collect evaluations upon completion of each module

Facilitators receive:

- Orientation to the Facilitating process
- Resource materials
- Professional Certificate upon completion of program

To be selected to serve as a Maine Can Work Facilitator, you must be working for pay, at least part time.

Your Employer: _____

Your Job Title: _____

How many hours, on average, do you currently work: _____



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1. Why do you want to be a Maine Can Work Facilitator?

2. Are you affiliated one of the following where you could offer a Maine Can Work group? (please check all that apply):

- ____ a peer center (which one: _____)
- ____ a recovery center (which one: _____)
- ____ a behavioral health home (which one: _____)
- ____ an ACT team (which one: _____)
- ____ a clubhouse (which one: _____)
- ____ other: (what and where: _____)

Please answer each of the following questions completely. If you need additional space for your answers, include attachments as necessary.

- A. Please describe how you relate to others with different backgrounds and viewpoints. Please give an example(s).



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B. Have you ever led/facilitated a group? Please describe the group and your participation in it.

C. What is your understanding of how employment relates to recovery?

D. What factors were important in your own recovery?

E. What do you anticipate will be your greatest challenge in participating in the facilitator training; and how will you address that challenge? What assistance might you need?

F. What do you anticipate will be your greatest challenge in facilitator a *Maine Can Work* program? What assistance might you need?



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Lunch will be provided for the training day.

I understand that all individuals trained as *Maine Can Work* facilitators are expected to:

- Facilitate at least one group through the entire *Maine Can Work* workbook within a year of the training and annually thereafter
- Meet with a CWIC/benefits specialist to do a benefit analysis if you are receiving SSI/SSDI benefits, or to get information about what's covered in a benefits analysis if they are not receiving SSI/SSDI benefits

Do you require any accommodations in order to participate in the *Maine Can Work* facilitator training?

If yes, please specify _____

Signature _____ Date _____

Please complete and email (Debbie@syntiro.org) or this application *no later* than **December 15, 2019**.

If you have questions, don't hesitate to ask Debbie Gilmer at Debbie@syntiro.org