## THE COURAGE TO SPEAK® FOUNDATION COURAGEOUS PARENTING 101® FACILITATOR APPLICATION

Name			Date _	
Address				
City		State	ZIP	
Home Phone	Work Pho	ne Cell I	Phone	
E-Mail Date of B			Birth	
Employer				
Address				
EDUCATION				
School	City/Town	Major	Year	Degree
High School				
College				
Graduate School				
Other				
,	aining or experience in servir	ng as a group leader or facilitator	? YES _	NO
List other skills and	experiences			

## THE COURAGE TO SPEAK® FOUNDATION COURAGEOUS PARENTING 101® FACILITATOR APPLICATION

Please explain below or on a separate sheet of paper why you are Courage to Speak® - Courageous Parenting 101® and or presenting			
Are you associated with a school, agency, church or synagogue, continuous interested in hosting a Courage to Speak® - Courageous Parenting 1		0 ,	
If YES, Contact Name			
Organization	Phone		
Address			
City	State	ZIP	
Tuition for <i>Courage to Speak® - Courageous Parenting 101®</i> is \$40 materials/facilitators guide, power point presentation and parent has	0. The fee includes andouts and trainin	use of the curriculum g.	
Will your employer or another third party be responsible for cos YES NO	st of your tuition ar	nd course materials?	
Please find enclosed a check in the amount of	\$		
Please bill my employer/other organization in the amo	unt of \$		
The three hour session will be offered at 2 separate locations.	Please select:		
Tuesday April 24, 2012 • 6pm West Rocks Middle School, Library • 81 West Rocks I OR	Rd. Norwalk CT. <b>A</b>	light supper will be provided.	
Thursday, April 26, 2012 • 9:30 am Central Connecticut State University, Connecticut R 1615 Stanley Street, New Britain, CT. A light lunch will		t Center	

A follow-up video training is required and will be conveniently scheduled.

Thank you for your interest in working with parents to reduce substance abuse among youth and to provide parents with the tools necessary to communicate openly and honestly with their children.

If you have any questions, please contact the Courage to Speak® Foundation at 203-831-9700 or you may e-mail Carol Troy at ctroy@couragetospeak.org and visit our website at www.couragetospeak.org

## Please return your application to:

The Courage to Speak® Foundation, Inc., 161 East Ave. Suite 14 Norwalk, CT 06851 or ctroy@couragetospeak.org or fax to 203-831-9800

www.couragetospeak.org • 1-203-831-9700