

# Registration Form

## Center for Aging Research and Educational Services

### Continuing Professional Training, 2011-2012

One registrant per form. You may register for more than one event. Please print or type legibly.

First Name:		Middle Initial:	Last Name:		
Honorific: <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Mr. <input type="checkbox"/> Dr.			Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male		
If you have registered for training under another name, what was it?			What name would you like on your name tag?		
Race/Ethnicity (Optional) <input type="checkbox"/> African American <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Caucasian <input type="checkbox"/> Latino/Hispanic <input type="checkbox"/> Native American/Eskimo <input type="checkbox"/> More than one					
Telephone (including area code) (We ask for home and cell numbers in case we must cancel events for weather or other emergencies.) Home: ( ) Cell: ( ) Work: ( ) ext.					
Work E-mail Address:			Fax Number: ( )		
Agency Name:					
Mailing Address (PO Box, Drawer #, or Street Name and Suite):					
City:		State:	Zip:	State Courier:	County:
Supervisor's Full Name:			Supervisor's Phone: (with area code)		
<b>Employment type</b> <input type="checkbox"/> Not applicable <input type="checkbox"/> County DSS – Permanent <input type="checkbox"/> County DSS – Temporary <input type="checkbox"/> County Not DSS <input type="checkbox"/> Federal agency <input type="checkbox"/> State agency/public university <input type="checkbox"/> Private university/ college <input type="checkbox"/> Private agency/business		<b>Work type</b> <input type="checkbox"/> Direct client service <input type="checkbox"/> Line supervisor <input type="checkbox"/> Trainer/staff development <input type="checkbox"/> Program manager <input type="checkbox"/> Program/admin. Support <input type="checkbox"/> Director <input type="checkbox"/> Other <input type="checkbox"/> Not applicable		<b>DSS Program Responsibilities</b> (If you do not work in a county DSS, please skip to the next box.) Check all that <b>currently</b> apply. <input type="checkbox"/> Adult care home CMS <input type="checkbox"/> Adult day care <input type="checkbox"/> Adult homes specialist <input type="checkbox"/> Adult protective services <input type="checkbox"/> Adult services intake <input type="checkbox"/> At-risk case management <input type="checkbox"/> Attorney <input type="checkbox"/> Guardianship <input type="checkbox"/> In-home aide services <input type="checkbox"/> Special assistance <input type="checkbox"/> Trainer <input type="checkbox"/> Other:	<b>Other Roles</b> (Complete this box if you <i>do not</i> work in a county DSS.) <input type="checkbox"/> Aging services <input type="checkbox"/> Attorney/judicial <input type="checkbox"/> Developmental disabilities <input type="checkbox"/> Health/medical <input type="checkbox"/> Law enforcement <input type="checkbox"/> Long-term care <input type="checkbox"/> Mental Health <input type="checkbox"/> Student/student intern <input type="checkbox"/> Substance abuse <input type="checkbox"/> Vocational rehabilitation <input type="checkbox"/> Other:
<b>Highest Degree</b> <input type="checkbox"/> HS <input type="checkbox"/> Associate <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Doctorate		<b>Highest Social Work Degree</b> <input type="checkbox"/> BSW/BSSW <input type="checkbox"/> MSW/MSSW <input type="checkbox"/> PhD/DSW			
<b>Beginning with the End in Mind: Refining Your Skills in Termination, \$20</b> <input type="checkbox"/> December 6, 2011, Chapel Hill <input type="checkbox"/> March 7, 2012, Burlington <b>Cognitive Impairments: It's Not Just Alzheimer's, \$40</b> <input type="checkbox"/> March 6–7, 2012 Smithfield <input type="checkbox"/> March 20–21, Asheboro <input type="checkbox"/> June 19–20, Asheville <b>Developing Effective Helping Relationships, \$40</b> <input type="checkbox"/> March 20–21, 2012, New Bern <input type="checkbox"/> June 5–6, Burlington <b>Effective Social Work Practice with Adults, Parts I and II, \$65</b> <input type="checkbox"/> November 15–17 and November 29–30 and December 1, 2011, Wilmington <input type="checkbox"/> February 7–9 and 21–23, 2012, Asheboro <input type="checkbox"/> May 1–3 and 15–17, Sylva			<b>Effective Supervision and Management in Adult Services, Each Module, \$60</b> <input type="checkbox"/> I. Developing Your Workforce, July 18–20, 2012, Boone <input type="checkbox"/> II. Working with the Community, August 1–3, Boone <b>Ethics and Everyday Practice, \$20</b> <input type="checkbox"/> May 31, 2012, Online <input type="checkbox"/> June 12, Online <b>Person-centered Thinking, \$85</b> <input type="checkbox"/> October 10–11, 2011, Asheville <input type="checkbox"/> November 8–9, Greenville <input type="checkbox"/> December 6–7, Hickory <input type="checkbox"/> January 18–19, 2012, Cary <input type="checkbox"/> March 12–13, Durham <b>Serious Mental Illness, \$40</b> <input type="checkbox"/> December 7–8, 2011, Raleigh <input type="checkbox"/> January 10–11, 2012, New Bern <b>Working with Older Adults, \$40</b> <input type="checkbox"/> November 8–9, 2011, Durham <input type="checkbox"/> April 4–5, 2012, Marion		
<b>How many events total?</b> _____ <b>Total fees</b> _____		<b>Payment Option</b> <input type="checkbox"/> Check enclosed <input type="checkbox"/> Agency Authorization of Payment enclosed <i>Please note: Registration forms must be accompanied by a check or authorization to be accepted.</i>			