

## Crossover Application Form: Mental Health First Aid

**Candidate Screening** 

## **Contact Information:**

Applicant's name: (first, last)					
Applicant Type:	I am applying to be a Independent Facilitator	an [		I am applying to be supported by my organization	
Organization name: (if applicable)					
Title:					
Email:					
Phone number:					
Preferred mailing address:					
Which Opening Minds c	ourse/courses are yo	ou current	tly certifie	d to facilitate:	
The Working Mind	Γ	7			
The Working Mind First F	Responder				
The Inquiring Mind	Γ				
The Working Mind Spor	ts [				
You acknowledge and a	-	=	-		
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You acknowledge and agree that any amounts paid by you are non-refundable if cancellation occurs less than 30 days prior to the registered course. Otherwise, a full refund, less a 25% administration fee, will be provided for cancellations received in writing. Registration is non-transferable.

## Acknowledgments:

- You understand that you must deliver a minimum of three courses per Facilitator year to maintain your certification.
- You understand that a course cannot be delivered to a group of less than 8 participants and to a maximum 15 (virtual) or 25 (face-to-face).
- You understand that you will be required to purchase access codes from the Opening Minds e-store for each participant who attends a course.
- You have reviewed the Facilitator Agreement and understand the requirements for being a facilitator

## Criteria: The Program is only facilitated by certified facilitators; candidates must demonstrate these minimum requirements:

- Minimum 2 years working front-line in mental health and/or substance use sectors (paid or volunteer)
  - supporting adults within the last ten years
- Demonstrated success (paid or volunteer) with facilitating group discussions, training, and/or giving presentations to groups of 8 or more
- Knowledge of the range of mental health services
- Positive attitudes towards people with mental health problems
- Enthusiasm to reduce stigma/discrimination associated with mental illness
- Proficiency in computer programs such as PowerPoint and Excel, and must have an email address, strong internet connection (for virtual delivery) and access to a computer.
- Knowledge of delivery platforms such as Zoom or MS Teams (for virtual delivery only)

Application Form: Mental Health First Aid Facilitator Certification Training Candidate Screening Questions

1. How would you explain mental health and wellness?

2.	. What interests you about facilitating the Mental Health First Aid course?						
3.	3. Are you attached to an organization that will support you in some ongoing way as an MHFA facilitator? (Your answer needs to demonstrate that you have a <b>good business plan or organizational support to ensure MHFA sustainability.)</b>						
	<ul> <li>a. If "Yes", please explain the support this organization will provide.</li> <li>b. If "No", please briefly explain the business plan you will use for this endeavour and any source of support and/or sponsorship. MHFA Instructors are required to deliver 3 workshops per year.</li> </ul>						

	nse provide 3 professional examples of how you have provided support to individuals living mental health problems from the following list: Suicidal thoughts/behaviour, anxiety, and, substance or trauma related disorders and or any crisis situations. Examples are to ude signs/symptoms, local resources/ treatments and demonstrate a strong base of							
	knowledge/experience in mental health.							
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5.	Do you have any questions about this training course? If yes, please include them here.							

Application Form:

Mental Health First Aid Facilitator Certification Training Candidate Screening Thank you for completing the application form.

Application Checklist Here is a reminder of the requirements:

- Completed Application Form
- Resume
- Crossover applicants are not required to provide reference letters. In place of uploading reference letters, pleas upload your resume a second time to allow you to move on in the application process

Remember that payment for the course will be requested once the application is approved. The course fee must be paid to complete the registration and secure a space in the desired course. Please send your application package to <a href="mailto:mhfafacilitators@openingminds.org">mhfafacilitators@openingminds.org</a> If you have any questions.

APPLICATIONS NEED TO BE RECEIVED AT LEAST 3 WEEKS BEFORE THE START OF THE COURSE