

# Crossover Application Form: The Working Mind First Responders

**Candidate Screening** 

## **Contact Information:**

| Applicant's name: (first, last)                       |              |
|-------------------------------------------------------|--------------|
| Application Type                                      | Independent: |
|                                                       | And or       |
|                                                       | In- Org:     |
| Organization name: (if applicable)                    |              |
| Title:                                                |              |
| Email:                                                |              |
| Phone number:                                         |              |
| Preferred mailing address:                            |              |
|                                                       |              |
| Languages Spoken:                                     | English:     |
| . <b>.</b>                                            | French:      |
| Which language(s) will you facilitate this course in? | English:     |
|                                                       | French:      |

## **Pre-Screening**

| You confirm that you are first / frontline responder or | Yes |
|---------------------------------------------------------|-----|
| hold experience in this role.                           |     |
| You acknowledge that this FCT and the evaluation will   | Yes |
| be conducted in English.                                |     |

Which Opening Minds course (s) are you currently certified to facilitate:

The Working Mind

The Working Mind Sports

The Inquiring Mind

Mental Health First Aid

#### Cancellation Policy:

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 two courses per year to maintain your certification.
- You understand that a course cannot be delivered to a group of less of 8 participants and to a maximum 15 (virtual) or 25 (face-to-face).
- You have reviewed the facilitator agreement(s) that pertain to this application (in-house or independent)

For in-house facilitators: (facilitator employed by my organization):

- You have reviewed the Facilitator Agreement and understand the requirements for being a facilitator
- You understand that you can only provide the Program to the employees of the Organization (listed above) and to no other third party, nor any individuals not employed by your organization.
- You understand that your organization will be paying participant fees for each participant who attends a course. FCT Registration and Information

#### **Qualification Criteria for in-house facilitators**

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

- Frontline experience as a first responder and/or experience in frontline response
- Ability to lead group discussions for groups of 8 or more.
- Ability to facilitate a minimum number of courses yearly and a commitment to meeting this requirement.
- Positive attitudes towards people living with mental health problems
- Driven to reduce stigma/discrimination associated with mental health in the workplace
- Proficient in PowerPoint; must have a valid email address, strong internet connection, and access to a computer. A two-screen setup is optimal for virtual facilitation.
- If applicable: Knowledge of virtual delivery platforms like Zoom or MS Teams.

### For Independent facilitators:

- You have reviewed the Independent Facilitator Agreement and understand the requirements for being a facilitator.
- You understand that you will be required to purchase access codes from the Opening Minds e-store for each participant that attends your course.

### **Qualification Criteria for independent facilitators**

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

- Minimum 2 years Frontline experience as a first responder and/or experience in frontline response
- Ability to lead group discussions for groups of 8 or more.
- Ability to facilitate a minimum number of courses yearly and a commitment to meeting this requirement.
- Positive attitudes towards people living with mental health problems
- Driven to reduce stigma/discrimination associated with mental health in the workplace
- Proficient in PowerPoint; must have a valid email address, strong internet connection, and access to a computer. A two-screen setup is optimal for virtual facilitation.
- If applicable: Knowledge of virtual delivery platforms like Zoom or MS Teams. The virtual FCT is exclusively delivered on the Zoom platform.

| Please note that submitting a Cross-over application does not save a space in a desired Cross-over course; space is only confirmed when payment has been received |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| The Cross-over course is a one-day demonstration of the course that you are wanting to be certified to facilitate.                                                |
| 1. Please identify which First Responder group you belong to or hold experience in:                                                                               |
| 2. What interests you about the facilitator role and delivering The Working Mind First Responder program?                                                         |
|                                                                                                                                                                   |

Answer ONLY if you are applying for an in-organization facilitator.

3. Please elaborate on how your organization will support you as a TWMFR Facilitator:

| Answer ONLY if you are applying for an independent facilitator.  4. Please provide 3 professional examples of how you have provided support to individuals living with mental health problems from the following list: Suicidal thoughts/behaviour, anxiety, mood, substance or traumarelated disorders and or any crisis situations. Examples are to include signs/symptoms, local resources/treatments and demonstrate a strong base of knowledge/experience in mental health. |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 5. What would you do if a course participant approached you about their personal mental health problems or substance use problems?                                                                                                                                                                                                                                                                                                                                               |
| 6. Do you have any questions about this cross-over training course? If yes, please include them here.                                                                                                                                                                                                                                                                                                                                                                            |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |

Thank you for completing the application form.

I am aware that I must deliver a minimum of two courses per year

I have read through the Facilitator Agreement that pertains to the application that I have submitted

**Application Checklist** 

- 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 or questions that you have to:

twmfacilitators@openingminds.org

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