Lincoln County
Mental Health Coalition

Overview, Expectations and Application Packet for ACE Community Presenters

Thanks to our new affiliate status with Elevate Montana, Lincoln County Mental Health Coalition is able to select 10 or more individuals from diverse backgrounds to be trained as community presenters for Adverse Childhood Experiences (ACEs). The cost for training is $100 per person.

Requirements and Expectations of presenters from ChildWise Institute and Lincoln County Mental Health Coalition:

1. **Decisions of selection committee will be final.** The committee will choose individuals from diverse backgrounds. Each person or organization that submits an application may or may not be selected.

2. **Presenters will be required to present (or co-present in pairs), at no charge, a total of four trainings to community groups or organizations in Lincoln County (including but not limited to groups addressing early childhood), over the course of two years between October 2017 and October 2019; internal trainings for an organization where the trainer works or volunteers do not count toward this “give back” provision. Opportunities for presentations will be identified by Coalition Coordinator, and can also be sought by the presenters, with approval by the Coordinator. Interdisciplinary teams of presenters will be arranged whenever possible.

3. An ACE Presenter is defined as someone who is qualified to maintain the fidelity of the ACE Study science base and can facilitate the expansion of interdisciplinary, multi-sector and community connections that lead to healthy and sustainable empowerment strategies and positive change.

4. An ACE Presenter is a person who has completed training by a ChildWise Certified ACE Master Trainer, and has been certified by the Master Trainer as competent in presenting the ACE Interface and ChildWise materials in a cohesive manner that is true to the fidelity of the ACE Interface and ChildWise Institute content. ACE Presenters may only present the Short Version of the materials. They must report to ChildWise dates of presentations, types of audiences, number of attendees, any ACE Scores they administer and attendee feedback forms.

5. ACE Presenters will provide educational presentations on the ACE Study primarily to civic and community audiences with the purpose of informing, inspiring and motivating to actions. These audiences will include groups such as Rotary, Kiwanis, church groups, etc. ACE Master Trainers are responsible to properly train and certify ACE Certified Presenters. ChildWise, together with the Master Trainers and ACE Interface will develop the criteria for such Presenters to be certified.

6. It is strongly encouraged that all ACE Master Trainers and ACE Presenters deliver ACE presentations in pairs when practical, learn from their fellow presenters, gain additional education about trauma-informed approaches in mitigating ACEs, and in using the Art of Hosting model to facilitate effective conversations that lead to actions.
Application for ACE Community Presenter Training

DUE DATE: 12 noon, Friday, August 25, 2017

Send this completed document to: ofantozzi@libby.org

Subject Line: ACE Community Presenter Application

Remember to complete all lines below, and fill in the yellow highlighted parts

Applicant Name: ________________________________________________________________

Organization you represent: ______________________________________________________

Your Title: ________________________________________ In this position since _____________

Email: ______________________________________________ Best Phone number: _____________

Mailing Address: _________________________________________________________________

City/State/Zip: __________________________________________________________________

Educational background: __________________________________________________________________

Professional Training relevant to ACEs: ______________________________________________

What type of organization do you work for (highlight or underline one category only)

- Early childhood provider/support organization
- Mental health provider
- Primary health/public health provider
- School district (teacher/counselor/other)
- Social services/basic needs
- Legal/Judicial system or support
- Other (specify type): ____________________________________________________________
**Professional/Biographical statement**: Please provide a bio of no more than 200 words that will help the screening group understand your professional and life experiences.

**YOUR PROFESSIONAL/BIOGRAPHICAL STATEMENT**
REQUIRED RESPONSES:

Please describe your experience making presentations to groups of people:
YOUR RESPONSE

Please provide 2 references (name, organization, phone and emails) of people who have seen you present.
YOUR RESPONSE

Besides the organization you work for, please give an idea about the kinds of organizations, community groups or other venues you would be interested in presenting the ACE information (either where you are currently involved or could connect to):
YOUR RESPONSE

DUE DATE: 12 noon, Friday, August 25, 2017
Send this completed document to: afantozzi@libby.org
Subject Line: ACE Community Presenter Application