



## REGISTRATION FORM—PAGE 1 OF 2

### I. PARTICIPANT INFORMATION

Please complete all sections of this form. Return Registration Form to CHEC by e-mail at [CHEC@lchealth.org](mailto:CHEC@lchealth.org) or by mail to Lowell Community Health Center, 161 Jackson Street, Lowell, MA 01852, Attention: CHEC

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Organization: \_\_\_\_\_

Title: \_\_\_\_\_ Population Served: \_\_\_\_\_

Mailing Address (required): \_\_\_\_\_

Office Phone (required): \_\_\_\_\_ Cell Phone (required): \_\_\_\_\_

E-mail (required): \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Supervisor e-mail (required): \_\_\_\_\_ Supervisor's Phone #: \_\_\_\_\_

Do you need individual arrangements (i.e., interpreters)? \_\_\_\_\_

Are you a Community Health Worker? (response required) ☐ YES ☐ NO

In the event of a training cancellation, please select the best way to reach you:

☐ Office Phone ☐ Cell Phone ☐ E-mail

Do you intend to complete all required courses within the COEC Program? ☐ YES ☐ NO ☐ MAYBE

### BASIC REQUIREMENTS:

- ☐ Some work experience in community based health work such as in the role of a Community Health Worker is preferred.
- ☐ Employment at a community organization and providing at least 20 hours a week of outreach education is preferred.
- ☐ Employer and employee must read Policy Agreement and sign Registration Form prior to or upon registration.

### II. CORE COURSE SELECTION

To complete the Comprehensive Outreach Education Certificate, please select **ALL CORE courses + 6 Health Modules**

☐ Check here to take all CORE courses or check off boxes below to select individual courses in the series.

*\*Emergency Care/CPR/AED course is only available for participants enrolled in the COEC Program*

<input type="checkbox"/> Introduction to Outreach Education	Tuesday, January 31, 2017	9:30 am – 4:30 pm
<input type="checkbox"/> Assessment Techniques	Tuesday, February 7, 2017	9:30 am – 1:00 pm
<input type="checkbox"/> Public Health	Thursday, February 9, 2017	9:30 am – 3:30 pm
<input type="checkbox"/> Community Organizing	Tuesday, February 14, 2017	9:30 am – 3:30 pm
<input type="checkbox"/> Motivational Interviewing	Tuesday, February 21, 2017	9:30 am – 3:30 pm
<input type="checkbox"/> Outreach Education I & II	Tuesday, February 28, 2017 Wednesday, March 1, 2017	9:30 am – 1:00 pm 9:30 am – 3:30 pm
<input type="checkbox"/> Cross Cultural Communication	Tuesday, March 7, 2017	9:30 am – 3:30 pm
<input type="checkbox"/> Harm Reduction & Prevention	Thursday, March 9, 2017	9:30 am – 1:00 pm
<input type="checkbox"/> Leadership Skills	Tuesday, March 21, 2017	9:30 am – 3:30 pm
<input type="checkbox"/> Health Benefits	Tuesday, March 28, 2017	9:30 am – 1:00 pm
<input type="checkbox"/> Care Coordination & Team-Based Care	Thursday, March 30, 2017	9:30 am – 1:00 pm
<input type="checkbox"/> *Emergency Care/CPR/AED	Tuesday, April 4, 2017	9:30 am – 3:00 pm

# REGISTRATION FORM—PAGE 2 OF 2

## III. HEALTH MODULES SELECTION

To complete the Comprehensive Outreach Education Certificate, please select **ALL CORE courses + 6 Health Modules**

☐ Check here to take all Health Modules or check off boxes below to select individual courses in the series.

<input type="checkbox"/> Substance Use	Tuesday, April 11, 2017	9:30 am – 12:30 pm
<input type="checkbox"/> Mental Health	Thursday, April 13, 2017	9:30 am – 12:30 pm
<input type="checkbox"/> HIV/AIDS 101	Tuesday, April 18, 2017	9:30 am – 12:30 pm
<input type="checkbox"/> Reproductive Health	Thursday, April 20, 2017	9:30 am – 12:30 pm
<input type="checkbox"/> LGBTQ 101	Tuesday, April 25, 2017	9:30 am – 12:30 pm
<input type="checkbox"/> Sexually Transmitted Infections (STIs)	Thursday, April 27, 2017	9:30 am – 12:30 pm
<input type="checkbox"/> Domestic Violence	Tuesday, May 2, 2017	9:30 am – 12:30 pm
<input type="checkbox"/> Chronic Disease	Thursday, May 4, 2017	9:30 am – 12:30 pm



This program is worth college credit at Northern Essex Community College. Are you interested in learning more about receiving academic credit for this program? ☐ YES ☐ NO

## IV. TRAINING FEES

Training fees are due at the time of registration and are non-refundable and non-transferable.

<input type="checkbox"/> Comprehensive Outreach Education Certificate (COEC) Program <i>All CORE Trainings + 6 Health Modules = 1 COEC Certificate</i>	\$350.00
<input type="checkbox"/> Individual courses (both CORE and Health Modules, excludes Emergency Care/CPR/AED)	\$25.00
<b>TOTAL AMOUNT DUE</b>	\$

## V. PAYMENT METHOD

Please make payable to:

**Lowell Community Health Center – CHEC**

☐ Agency Check\*

☐ Money Order

*\*Please include copy of check request if submitting registration form by e-mail*

## VI. SIGNATURES

By signing below, my supervisor and I acknowledge that we have read and agree with the Community Health Education Center's (CHEC) policies and procedures. We agree to comply with all training policies and procedures in order to participate in any CHEC training, and understand that failure to comply may prevent present or future participation.

\_\_\_\_\_  
Participant's Printed Name

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Supervisor's Printed Name

\_\_\_\_\_  
Supervisor's Signature

## VII. SUBMIT REGISTRATION FORM & PAYMENT

**EMAIL:** CHEC@lchealth.org

**MAIL:** Lowell Community Health Center—CHEC  
161 Jackson Street  
Lowell, MA 01852