



Ruth Ellis Center Quarterly Trainings
Registration Form for the February 28, 2015 training

Name: _____
First Name *Last Name*

Address: _____
Street Address *City* *State* *Zip Code*

Contact: _____
Phone *E-mail*

For the purposes of this training, my role is best described as:

- | | |
|--|---|
| <input type="checkbox"/> New volunteer | <input type="checkbox"/> Continuing Volunteer |
| <input type="checkbox"/> New staff member | <input type="checkbox"/> Continuing Staff member |
| <input type="checkbox"/> New intern | <input type="checkbox"/> Continuing Intern |
| <input type="checkbox"/> Individual community member | <input type="checkbox"/> With a community/ external group |
| <input type="checkbox"/> Board Member | <input type="checkbox"/> Other: _____ |

Please check the trainings that you have NOT been to and/or are interested in:

- Initial Orientation: (9-10AM)** For people who are new to volunteering or employment at Ruth Ellis Center **OR** are interested in volunteering or interning at REC. This will include a review of paperwork and clearances necessary to get involved.
- Tour: (10-10:30AM)** For people who **will be working** in the space and/or have never been on an official Ruth Ellis Center tour.

SESSION 1 (10:30AM-12:00PM) (Select One)

- Ruth Ellis Realness:** Basics around best practices for working with LGBTQ youth, productive frame works for language and interpersonal skills.

Lunch Options (*donations appreciated*):

Lunch is available for participants who are present for all day trainings.

- vegetarian option meat option
- allergies: _____



SESSION 2 (1:00PM-3:00PM) (Select One)

- Ruth Ellis Principles of Work:** Learn about how and why the Ruth Ellis Center uses harm reduction, positive youth development, transformative justice and trauma informed care.
- Parents and Families of LGBTQ Youth:** Learn more about how to support LGBTQ youth AND their families. This training is open to family and/or people working with families.

SESSION 3 (3:00-4:30) (Select One)

- Emotional Literacy:** Trauma informed practices in working with LGBTQ youth.
- Charity to Solidarity:** Making the most out of volunteering through gaining a deeper understanding of how we can authentically meet the needs of the Ruth Ellis Community.

Please advise us on any considerations that will make the training more accessible for you:

- Translator: _____ (type of service; ASL, English to __)
- Child Care: _____
(ages and # of children; care provided by volunteers in REC space where training takes place)
- Other:

****The space that we typically have training is only accessible by going up 1 story of stairs. We are more than happy to change the location if this is a barrier to participation.**

To **ensure** a spot and that your accommodations are met; please submit this form **two weeks prior** to the date of the training. Forms turned in after this time are not guaranteed a spot, but can be put at the top of the next quarterly training registration list. Please call us at 313-252-1950 with any questions.

Return form to:

Mail:

Ruth Ellis Center
ATTN: Volunteer Services
77 Victor St.
Highland Park, MI 48203

Email:

volunteer@ruthelliscenter.org