



Georgia Commission on Family Violence

Application for Approval of Training for Facilitators of Family Violence Intervention Programs

Georgia Commission on Family Violence
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INTRODUCTION

To facilitate victim safety, the Georgia Commission on Family Violence (GCFV) and the Georgia Department of Community Supervision (DCS) shall certify trainings as state approved. Only GCFV-approved trainings may be used to fulfill training and continuing education requirements for facilitators of family violence intervention programs (FVIPs). All GCFV-approved trainings must reinforce the centrality of victim safety, batterer accountability, and the importance of a coordinated community response (CCR) to domestic violence.

ELIGIBILITY

To be considered as a GCFV-approved training, a completed and signed application with all requested attachments shall be submitted to GCFV. GCFV will notify the applicant **in writing** of its decision to approve, deny, or withdraw GCFV-approval of training. GCFV reserves the right to seek clarification and verification on any items submitted with the application. GCFV will not return any items submitted with the application.

GCFV may deny or withdraw approval at any time if:

the training encourages any concept in violation of the state minimum standards for certified FVIPs;

GCFV determines that the trainers have insufficient training, experience, or track record of training performance to provide an appropriate level of training in an area specifically relevant for FVIP facilitators and trainees;

the application documents are incomplete, inaccurate, or insufficient to determine whether the training encourages any concept in violation of the state minimum standards for certified FVIPs;

the training was planned and developed with insufficient opportunities for feedback and input from victim advocates and other members of the coordinated community response (CCR) to domestic violence.

DETERMINING THE NUMBER OF CONTINUING EDUCATION CREDITS FOR YOUR PROGRAM

The training provider is instructed to estimate the number of training hours to be provided. Any breaks, welcome speeches or announcements, may not be counted as instructional time. GCFV determines the final number of training hours for a GCFV-approved training.

MONITORING

a) Attendance: It is the responsibility of the training providers to document that participants have attended the full training. **Training providers must send a copy of sign-in sheets to GCFV 30 days after the completion of the training.**

b) Evaluations: Training providers must distribute and collect evaluation forms from attendees. **Evaluation forms submitted by attendees will be made available to GCFV upon request.**

c) Observation of Training: Training providers must allow a GCFV staff member or monitor to observe the training to ensure compliance with minimum FVIP standards and this agreement.

d) Permanent Records: All training attendance, financial, and evaluation records must be maintained by the training provider for three years.

ADVERTISEMENT

a) How to Promote GCFV-Approval on Your Training Literature:

Trainings approved by GCFV may display the following information on their promotional material: “This training was approved by the Georgia Commission on Family Violence for _____ training hours for FVIP facilitators.”

b) E-mailed List of Approved Trainings: GCFV may announce your training via e-mail to GCFV’s listserv participants.

SUBMITTING APPLICATIONS TO GCFV: Please mail the application below with all requested attachments to:

**Georgia Commission on Family Violence
Attn: FVIP Training
270 Washington St. SW, Suite 5145
Atlanta, GA 30334**

Faxed applications will not be accepted.

APPLICATION FOR GCFV-APPROVAL OF TRAINING

Please complete and return the completed application including attachments. Submit application information at least **one month** (four weeks) prior to each training.

A. Provider Information

1. *Name of sponsoring organization*

2. *Staff contact person*

3. *Title*

4. *Phone number*

5. *E-mail address*

6. *Fax*

7. *Web site address*

8. *Mailing address*

9. *Mission statement of organization*

10. *Was a victim liaison(s) involved in planning the training? If yes, please provide name and phone number of the victim liaison and details about the extent of the victim liaison's participation in the planning:*

11. *Describe how you have verified that the training is victim-centered?*

B. Training Information

(Please duplicate if your organization wishes to have more than one training approved.)

1. Title of training

2. Training organization (if different from sponsoring organization)

3. Mission statement of training organization

2. Proposed date, time and location of training

<i>Date</i>	<i>Time</i>	<i>Location</i>

3. Provide a brief training description

Attachment A-1: Detailed Agenda

Attach a copy of a detailed agenda outlining the sequence of topics, time to be spent on each topic, and name of the trainer(s) to cover each topic during the training.

Attachment A-2: Qualifications of Trainers

For each individual trainer, please provide a current resume and/or other documentation to show that the trainer is qualified to provide training that is relevant and appropriate for FVIP facilitators operating in accordance with the GCFV's Minimum Standards for FVIP Certification.

To help GCFV assess a trainer's qualification, the resume and/or documentation should address many or all of the following:

- *Years in the field;*

- *Where and when the trainer received FVIP training;*
- *Where and when the trainer received victim-centered advocacy experience;*
- *Academic accomplishments;*
- *Number of previous trainings performed;*
- *References from previous trainings; and,*
- *Details about how input from victims and victim advocates has been incorporated in the planning and implementation of the training.*

Attachment A-3: Draft Brochure

Attach a copy of program public relations brochure or publication sent to participants in advance of training. If final copy is not yet available, submit draft copy.

5. Number of GCFV-approved training hours requested

6. Who is the target audience for your training?

7. List the approximate number of participants

8. Learning Objectives

List the learning objectives for the training

<i>1</i>	
<i>2</i>	
<i>3</i>	
<i>4</i>	
<i>5</i>	

Attachment A-4

Attach a copy of the evaluation form to be used in your training. Each evaluation form **must list** the learning objectives from each training in order to ascertain that participant goals have been reached. In addition, include feedback on participant satisfaction in the quality of instruction and teaching ability, the instructor's level of knowledge and expertise, and the usefulness of the program content for FVIP facilitators.

C. Training Participation Agreement

As a sponsoring organization for a GCFV-Approved training, I agree to:

✓ *Submit a complete and accurate application.*

✓ *Affirm that my organization has:*
a) *A means of responsibility for control over all aspects of this training to ensure that educational objectives are met and that the training supports the concepts within the Minimum Standards for FVIP Certification.*
b) *Read and agreed to comply with all aspects of this application and agreement.*
c) *A system in place for obtaining and retaining attendance and evaluation information from the training.*

Print Name

Date

Signature

Title

Name of Sponsoring Organization