

**Facilitator in Training Verification Checklist**

*This checklist is intended to serve as a guide for Facilitators-in-Training and their Coaches to ensure that all requirements for certification are met prior to submitting the official application. Additional items are included to assist FITs with tracking their activities but are not required. For a full explanation of all requirements for certification please see the CYFD-BHS Wraparound Program Manual & Implementation Guide (v12.1.19). This document along with all supporting documents, will be uploaded with Facilitator Application for Certification form. Acceptance or denial of application will be communicated to the applicant within 30 days via letter. Upon approval of application applicant will be scheduled to sit for exam.*

**Facilitator in Training Name:** \_\_\_\_\_

**Coach Name:** \_\_\_\_\_

**Start Date:** \_\_\_\_\_ **Completion Date:** \_\_\_\_\_ **Length of Time (months):** \_\_\_\_\_

*FITs must complete all requirements within 6-18 months*

**The following NM Wraparound CARES criteria for Wraparound Facilitators in Training have been met.**

Initials	Requirement	Date Completed
	<i>You will upload copies of all certificates where applicable</i>	
<b>Orientation and Training Requirements</b>		
	Facilitator-in-Training Application	
	Pre-Requisite E-learning Modules	
	Foundations of Wraparound Practice Training	
	Follow-up Training I: Engagement, Crisis, and Stability Planning	
	Follow-up Training II: Deepening our Understanding of Vision, Needs, & Benchmarks	
	Follow-up Training III: Teaming and Conflict Resolution	
<b>Grant Specific or Additional Training Requirements</b>		
<i>The trainings listed below are not required for certification at this time, however they are a part of the recommended trainings for facilitators or are requirement for federal grant funded programs.</i>		
	NOMS training	
	Data & Documentation Training	
	WERT Fidelity Tools Training	
	CANS Certification	
<b>Coaching &amp; Fidelity Monitoring Requirements</b>		
	60-hours of Coaching by an Endorsed Wraparound Coach <i>You will upload signed coaching logs</i>	
	Implemented the NM Wraparound model with a minimum of three enrolled youth/families within the 18-month period. <b>List evaluation IDs of 3 youth/families:</b> _____ , _____ , _____	
	Complete a minimum of <u>3 Team Observation Measures</u> (TOM)s & <u>2 Wraparound Fidelity Index</u> (WFI)s within the 18-month training period. <b>TOM Dates:</b> _____ , _____ , _____ <b>WFI Dates:</b> _____ , _____	
	Met or exceeded all of the competencies outlined in the Facilitator Evaluation Form. <i>Will be submitted by coach.</i>	
<b>Letters of Reference</b>		
<i>In your electronic application you will provide the name and email of your 3 references, they will be sent a reference form to complete. <b>Please inform your references and ask them to return the form timely.</b></i>		
	Reference from Peer/Colleague	
	Reference from outside agency with whom you have worked in a Wraparound setting	
	Reference from Wraparound Coach	