

Nechi Specialty Courses

SPECIALTY COURSES

Adult Children of Alcoholics (ACOA)

Course Description:

This five-day course explores the impact of growing up around unhealthy behaviours or addictions. It will enhance your relationships and enrich your recovery.

Beyond Trauma and Abuse (JHH)

Course Description:

Nechi Institute is proud to present Beyond Trauma and Abuse course for men or women. This course will benefit you, your family, and your community. It will help you address uncomfortable real life situations with the ability to move forward beyond pain.

Fetal Alcohol Spectrum Disorders (FASD)

Course Description:

This dynamic comprehensive course is for caregivers, family members, frontline workers, advocates, and those affected by this diverse disorder. Topics include identifying resources, communicating the importance of diagnosis, promoting prevention, educating your community, and developing support networks.

Gambling Awareness: Treatment and Recovery Issues (GA)

Course Description:

This relevant, much-needed program is specifically for those seeking to help others cope with this potentially devastating addiction. Students are asked to refrain from engaging in gambling activities in an effort to increase awareness of gambling addictions.

Group Facilitation (GF) *

Course Description:

This unique course provides participants with the opportunity to develop the knowledge, skills and awareness required to effectively facilitate groups in Aboriginal organizations and communities.

Indigenous Smoking Cessation Training

Course Description:

This five-day course covers four modules: traditional tobacco, commercial tobacco, tobacco prevention, and tobacco control strategies. The Peer Educator

component will provide skills to assist community advocates to conduct brief interventions with documented research resource material founded on cultural principles.

Our Spirit Survived (OSS): Healing from Residential School

Course Description:

The goal of this course is to establish an objective or cognitive understanding of the history and legacy of the residential school experience in Canada. Students will explore the impacts of the residential school on the lives of Indigenous individuals, families and communities, and the importance for survivors to grieve and cope with loss.

Pharmacology (PHARM)

Course Description:

This three-day (21 hour) course introduces students to a basic understanding of the role of pharmacology in the addictions field. It is accredited through CACCF and is used for the CACCF exam and testing requirements for the International Addiction Counselor Certification.

Reconciliation with Indigenous Peoples (RIP)

Course Description:

This course is in alignment with the TRC Recommendations to reconcile with Indigenous People. Participants will explore their knowledge of the impact of historical events on Indigenous Communities, review indigenous practices in decolonization, become aware of cultural protocol and awareness, and an opportunity to engage in Indigenous history and contemporary cultures with Traditional Elders from the community.

Youth Tobacco Cessation (YTC)

Course Description:

This course will focus on the necessary skills and techniques required to educate youth on the consequences of nicotine use and addiction. A variety of tools will be employed, such as the "Ditch the Spit" on-line module and the Nechi Tobacco Projects kit.



NECHI

PROTECTING PERSONAL INFORMATION

Nechi Institute: Centre of Indigenous Learning ("NECHI") is committed to compliance with the laws of Canada and Alberta respecting the privacy of personal information. The personal information you provide in this application form is collected by Nechi for authorized purposes including admission and registration; administration of records, scholarships and awards, student services; alumni relations and fundraising; and Institute planning and research. Some of the personal information collected will be disclosed to sponsoring and funding agencies that require reporting on the students they fund. In addition, Nechi may disclose your personal information: when required to do so by law, and to a public authority when, in the judgment of Nechi there appears to be an imminent danger which could be avoided by disclosing the information. By signing this form you are consenting to the collection and use of personal information as set out in the aforementioned manner. If you have questions about the collection, use and disclosure of personal information, please contact the Nechi at 780.459.1884 or mail: P.O. Box 2039, Station Main, St. Albert, AB T8N 2G3.

SECTION A: PERSONAL INFORMATION

PLEASE COMPLETE THE FOLLOWING INFORMATION					Date of Birth and Gender are used in the student records management process to identify and differentiate our students. Failure to provide this information will result in Nechi not being able to properly process your application.
HAVE YOU PREVIOUSLY APPLIED FOR OR ATTENDED NECHI TRAINING? YES <input type="checkbox"/> NO <input type="checkbox"/>	ARE YOU AN INTERNATIONAL STUDENT? YES <input type="checkbox"/> NO <input type="checkbox"/>	NECHI STUDENT ID (IF KNOWN)	GENDER F <input type="checkbox"/> M <input type="checkbox"/>	DATE OF BIRTH (D/M/YYYY)	
FIRST NAME		LAST NAME		MIDDLE NAME/INITIAL	
HAVE YOU TAKEN OUR TRAINING UNDER ANOTHER NAME? FORMER NAME (if applicable)					
BOX/APT NO./STREET		CITY/TOWN	PROVINCE	POSTAL CODE	
COUNTRY	HOME TELEPHONE# ()	WORK TELEPHONE# ()	MESSAGES CAN BE LEFT AT:		
EMAIL:					

INFORMATION COLLECTED BELOW PROVIDES A PROFILE OF NECHI STUDENTS AND NON IDENTIFYING AGGREGATE STATISTICAL DATA FOR FUNDERS.

Last Grade Or Degree Completed <input type="checkbox"/> ELEMENTARY (K-6) <input type="checkbox"/> JR. HIGH (7-9) <input type="checkbox"/> SR. HIGH (10-12) Please Indicate Only One <input type="checkbox"/> COLLEGE/TECHNICAL <input type="checkbox"/> UNDERGRADUATE <input type="checkbox"/> GRADUATE <input type="checkbox"/> PHD	WHAT COURSE ARE YOU APPLYING FOR? PLEASE INDICATE ONLY ONE <input type="checkbox"/> CAT – COMMUNITY ADDICTIONS TRAINING Are you applying for our Summer Session: _____ <input type="checkbox"/> ACT – ADVANCED COUNSELOR TRAINING <input type="checkbox"/> IAC – INTRODUCTORY TO ADDICTIONS AND COUNSELLING <input type="checkbox"/> TOT – TRAINING OF TRAINERS <input type="checkbox"/> IASC – INDIGENOUS ADDICTIONS SERVICES CERTIFICATE <input type="checkbox"/> IASD – INDIGENOUS ADDICTIONS SERVICES DIPLOMA	SPECIALTY COURSES NOT LISTED: Applications are accepted on a first-come, first-serve basis provided the application is complete, prerequisites met and full fee submitted. NECHI RE-SERVES THE RIGHT TO CANCEL ANY COURSE WHEN MINIMUM REGISTRATION LEVEL IS NOT ACHIEVED AND TO MAKE ANY CHANGES TO COURSE CONTENT AS CIRCUMSTANCES REQUIRE. Every reasonable effort will be made to inform students of cancellations before the commencement date.
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IMPORTANT: I WILL BE PAYING ACCOMMODATION FEES INCLUDING MEALS: YES NO

ADDITIONAL HERITAGE If you wish to declare that you are of Indigenous ancestry please check ONLY ONE box below: <input type="checkbox"/> STATUS INDIAN (FIRST NATION) <input type="checkbox"/> NON-STATUS INDIAN <input type="checkbox"/> BILL C-31 <input type="checkbox"/> METIS <input type="checkbox"/> INUIT <input type="checkbox"/> OTHER _____	TREATY NUMBER: _____ BAND NAME AND LOCATION: _____ _____ _____	HOW DID YOU FIRST HEAR ABOUT NECHI? _____ FAMILY MEMBER/FRIEND _____ INTERNET (FACEBOOK) _____ MARKETING EVENT _____ WEBSITE FLYER _____ MAILED INFORMATION PACKAGE _____ OTHER _____
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Please list all current medications, if any: _____ _____ _____

PLEASE READ BEFORE SIGNING THIS APPLICATION:

I, the applicant, consent to the collection and use of personal information as stated in Protecting Personal Information above. **I UNDERSTAND THAT ONE OF THE CONDITIONS OF MY ADMISSION TO NECHI IS MY AGREEMENT THAT I WILL ABSTAIN FROM THE USE OF ALCOHOL AND ILLICIT DRUGS FROM THE TIME OF MY ADMISSION TO THE COMPLETION OF MY COURSE.** NOTE: If you are in RECOVERY there is a one (1) year sobriety requirement prior to taking training.

SIGNATURE OF APPLICANT	DATE OF APPLICATION
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*****IMPORTANT INFORMATION – PLEASE READ BEFORE PROCEEDING*****

NOTE: SECTION A – PERSONAL INFORMATION AND SECTION B – SPONSOR & EMPLOYMENT INFORMATION MUST BE COMPLETED.

SECTION C – PERSONAL HISTORY FOR ALL APPLICANTS MUST BE COMPLETED.

SECTION B: SPONSOR AND EMPLOYMENT INFORMATION

All students are assessed a fee for textbooks and graduation. An agreement regarding these fees and travel costs should be discussed between the sponsoring agency and the applicant. Fees must be received at least one month prior to course start date.

EMPLOYER OR SPONSORING AGENCY	SUPERVISOR/CONTACT	
BOX/STREET ADDRESS	PROVINCE	POSTAL CODE
PHONE ()	FAX ()	
LENGTH OF APPLICANTS EMPLOYMENT AT PRESENT AGENCY/ORGANIZATION		
APPLICANT'S EMPLOYMENT POSITION/TITLE		

THIS SECTION TO BE COMPLETED BY THE AUTHORIZED REPRESENTATIVE OF THE SPONSORING AGENCY

Is this applicant	Total Volunteer Hours Completed
1. A Volunteer? YES <input type="checkbox"/> NO <input type="checkbox"/>	_____
2. A Counsellor? YES <input type="checkbox"/> NO <input type="checkbox"/>	_____
3. In a Management Position? YES <input type="checkbox"/> NO <input type="checkbox"/>	_____
4. Entitled to receive the T22A? YES <input type="checkbox"/> NO <input type="checkbox"/>	_____

PLEASE READ BEFORE SIGNING THIS APPLICATION

I, the Sponsor/Employer, agree to sponsor the applicant for Nechi Training. If the applicant is accepted into Nechi Training, I agree to accept financial responsibility for tuition, books, accommodation, meals, and travel costs associated with the training for the student unless the applicant and this agency have another agreement in place.

Please mail the invoice to: _____

AUTHORIZED AGENT (PRINT CLEARLY):	AUTHORIZED AGENCY SIGNATURE (PRINT NAME):
DATE	FOR OFFICE USE ONLY

NOTE: Payment for this applicant must be received by our office three weeks prior to the commencement of training. Once payment has been received, the student will be notified via telephone by Student Services of their confirmed start date!

*****IMPORTANT INFORMATION – PLEASE READ BEFORE PROCEEDING*****

It is your responsibility to ensure all requested information on this application is provided.

Incomplete applications will not be accepted for processing until it is complete.

SECTION C – SUITABILITY SECTION

PERSONAL HISTORY IS REQUIRED FOR ALL APPLICANTS ATTENDING ALL COURSES

PLEASE DESCRIBE YOUR HISTORY WITH ADDICTIONS.

DO YOU HAVE ANY EXPERIENCE IN THE FIELD OF ADDICTIONS COUNSELLING, HUMAN SERVICES OR MANAGEMENT? IF SO, PLEASE PROVIDE DETAILS.

ARE YOU EMPLOYED? DESCRIBE YOU EMPLOYMENT SITUATION AND HOW YOU THINK NECHI TRAINING WILL ASSIST YOU PERSONALLY OR PROFESSIONALLY?

HAVE YOU TAKEN ANY ADULT EDUCATION COURSES? IF YES, PLEASE PROVIDE DETAILS.



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