

Training Registration Form

Fax to: 231-347-1241 **Attn:** Mary MacNaughton
Email to: mmacnaughton@norcoch.org

Mail to: North Country CMH
 Mary MacNaughton
 One MacDonald Drive Suite A
 Petoskey, MI 49770

Provider Home	Name	Hire Date	Training Type	Training Date Requested
---------------	------	-----------	---------------	-------------------------

Example: Spring Hill AFC	John Smith	01/10/10	Recipient Rights	01/18/10

Michigan Mental Health Code 330.1755/Sec. 755 (5) (f) states; – All individuals employed by the community mental health services program, contract agency or licensed hospital receive training related to recipient rights protection before or within 30 days after being employed.

NCCMH Providers Contract states; - CPR, First Aid, Recipient Rights and Non-Violent Crisis Intervention training be completed before or within 30 days after being employed.