#### **Default Question Block**



## **NEPBIS Training of Trainers Application**

Applications will be reviewed based on readiness requirements in the following broad areas (including, but not limited to, examples of specific skills/competencies listed below) :

**Educational, Professional, & Theoretical Foundation** (e.g., relevant coursework, school-based experience, and fluency in ABA, instruction, and/or MTSS) **PBIS Implementation** (e.g., support via participation, coaching, training, and/or technical

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**Adult Behavior Change** (e.g., provision of professional development/training via coaching, consultation, and/or formal training)

**Professionalism** (e.g., strength-based approach, constructive communication skills, commitment to on-going skill development)

**Tech Literacy** (e.g., fluency with technology associated with training, coaching, and collaboration with stakeholders)

Please feel free to address any areas where you may not meet minimum requirements in your personal statement.

### **Section 1: Contact Information**

4/26/23,	10.35	AM
$\pi/20/23$ ,	10.55	1 1111

What email address should we use to contact you?

What phone number should we use to contact you?

### Section 2: Background Requirements

Applicants not meeting minimum requirements in one or more of these areas may be considered based on the availability of positions and the balance of skills across the cohort.

Do you currently have relevant graduate course work in Special Education, School Psychology, Psychology, Education, or related field?

O Yes

O No

If yes, please attach transcript showing relevant graduate work.

Do you have 3 or more years of professional school-based experience?

O Yes

O No

Please summarize relevant experiences in 1-3 sentences.

Please describe your experience with a school based PBIS or other multi-tiered framework leadership team.

Minimum: 2 or more years of experience as an *active* participant on or with a school-based intervention team in a multi-tiered framework

Preferred: 2 or more years of experience as an active participant on a PBIS team, as a PBIS coach (internal or external), as a PBIS technical assistance provider, or as a PBIS trainer

- O Less than 2 years experience
- O Minimum
- O Preferred

Please summarize relevant experiences in 1-3 sentences.

Please describe your experience supporting adult behavior change.

**Minimum**: Experience with supporting professional development (e.g., coaching, performance feedback, skill-based training) or related professional supports

**Preferred**: Provided coaching, consultation, or direct training on topic related to PBIS and/or behavior (e.g., classroom management) and collected evaluation data to support training effectiveness

- O No experience with supporting adult behavior change
- O Minimum
- O Preferred

Please summarize relevant experiences in 1-3 sentences.

#### **Section 3: Participation Commitments**

If accepted to the training of trainers cohort, I commit to the following:

	l agree	I do not agree
Maintaining privacy and confidentiality	0	0
Using a strengths based approach	0	Ο
Using positive, preventative and constructive communication skills	Ο	Ο
Obtaining and submit district approval for participation (if applicable)	Ο	Ο
Completing 6 days of ToT events in year 1 and 3 in year 2	Ο	Ο
Completing on-going skill development activities (e.g., booster sessions to maintain active trainer status and to work toward advanced trainer status	Ο	Ο
Consistently using the NEPBIS training curriculum and evaluation structures when providing PBIS training	Ο	Ο
Staying current with new research and practices by participating in the PBIS professional network (via national, regional, and state conferences)	Ο	Ο
Completing all required activities including leading (or co-leading) team training sequences	Ο	Ο

## **Section 4: Supporting Documents**

Please upload the following documents in support of your application

Please upload a copy of your resume or CV

Please attach (in a word document or PDF file) a personal statement that describes your: 1) experience with and approach to group training and coaching

- 2) theoretical background and approach to providing behavior supports
- 3) future plans for providing PBIS training, and
- 4) addresses any areas for which minimum requirements are not currently met

Please upload (as a word document or PDF file) evidence of your effectiveness as a trainer if available (e.g., training evaluations or feedback from participants, outcome data in supported schools)

Please upload (as a word document or PDF file) two letters of reference which speak to your experience with training and or coaching.

Please upload any additional support materials that you would like to inlcude in your application (optional, not required).

Please provide a link (via dropbox or youtube private link) to a video clip (20- 30 mins) of a training you have delivered (if available, not required).

Section 5: NEPBIS Training of Trainers Billing Information

Please provide billing information for invoice to be mailed/emailed. It is essential that you review this section for accuracy to ensure payment in time for your attendance!

Name of person to receive billing invoice

# Billing name of school or organization

Billing school or organization address

Billing contact email

Billing contact phone number

Thank you for submitting your application to the next NEPBIS Training of Trainers Cohort! You can expect to hear from us soon.

In the meantime, please direct any questions to Susannah Everett at susannah.everett@uconn.edu

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