

Nurturing Parenting Program®

Three Day Facilitator Training
with

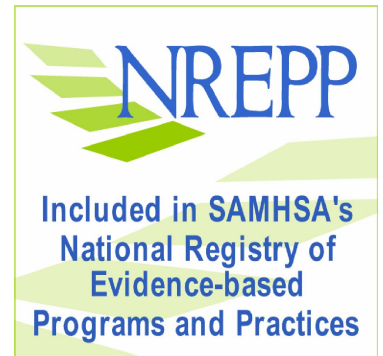
Nanci Vargas, LMFT #98458

Inglewood, California

April 1, 2, & 3, 2020

In three days, participants will learn:

- the philosophy of Nurturing Parenting;
- the five parenting constructs of abuse/neglect;
- the impact of maltreatment on brain development;
- how to assess high risk parenting beliefs;
- to tailor make programs based on family's needs;
- to gather process evaluation data; (AAPI-2)
- to evaluate pre-post program impact;
- to implement home, group program models



Includes: hands-on and practical approach to conducting home and group-based Nurturing Programs that includes facilitating weekly sessions, how to use program materials, videos, and assessment tools, children's and parents' program activities, icebreakers, personal growth lessons, activities for personal power, alternatives to corporal punishment, building self-esteem, self-concept and empathy in parents and children. This is an interactive, learner-centered workshop with opportunity for practice.

Workshop Details

Please email Registration form to: NanciVargasMFT@gmail.com

Dates: April 1, 2, & 3, 2020

Cost: **\$400 per person**

\$425 per person after deadline March 20th, 2020

Location:

Iglesia Nuevas de Gozo
4454 Lennox Blvd.
Inglewood, CA 90304
Local Number: 323-364-4640

Times: 8:45am to 9:00am Sign-in (First day only)

9:00am to 4:00pm training with one-hour break for lunch (on your own)

Each workshop participant will receive a **Facilitator Training Workbook**, additional **Workshop Training Handouts**. Each participant also receives a **Certificate** acknowledging Facilitator Training in the Nurturing Programs.

Registration Form

Nurturing Parenting Program Facilitator Workshop

MAIL THIS FORM, along with your registration fee payable to:

Nanci Vargas, LMFT

14651 Harper Street, Midway City, CA 92655

Mobile: 323.364.4640

Email: nancivargasmft@gmail.com

Multiple registrations: Fill out one registration for each participant

Agency _____

Name _____

Address _____

City, State Zip _____

Phone _____

Email _____

Make Check Payable: Nanci Vargas

*Tentative schedule. * Reservation only confirmed with payment. Lunch is personal responsibility.

* No refund will be made for cancellations within 7 calendar days prior to the scheduled event.