

**2016 Written TNT Application**

**PLEASE READ THESE INSTRUCTIONS CAREFULLY:**

Your answers to these application questions should capture your overall MI learning experience, MI training goals, and reasons for wanting to participate in a MINT-sponsored TNT.

If you have any trouble answering the questions or completing this form, please email us at mint.tnt.applicant@gmail.com to receive assistance.

**Guide to Completing this Form:**

For each question below, complete the corresponding table when provided (at the end of this document), or give a brief description in the box. To fill in your answers, click on the gray shaded area inside the box, and type in your response. Please **adhere to word limits, where provided.**

**For Questions that Require a Check Box**, click on the box that represents your answer.

**If you are using a** **Mac**, you should be able to simply click on the box for your answer, and an “x” will appear inside the box.

**If you are using a** **PC,** and cannot click directly on the box, you may need to **right click** on the box, choose **Properties,** and under **Default Value, click next to the word “Checked,” then click “OK”**

**To enter text please simply click on the grey area to type.**

1. **MI Training** **Received**- Describe how you learned MI by listing your initial and ongoing MI training experiences. Begin with the first MI training you took part in, and list your continued sequence of MI Training. Include the following details in the table below:
	1. MI Training Format and Level – Briefly describe **the format** and **leve**l of this training (e.g., Introductory Presentation, Intermediate Workshop, Advanced Workshop with Coaching). **Indicate what portion of this training was Experiential (included practice time for skills-building, vs. Presentation Only, where no MI skills practice was included) by percentage (e.g. 75%)**
	2. Dates of your training – Year (and month, if known)
	3. Number of Hours – (e.g., 2-Hours, 4-hours; 8-hours; 18-hours, etc.)
	4. Trainers – Provide Names of your Trainers
	5. Trainers MINT Members? - Were your Trainer(s) MINT members? (“Y” = Yes; “N” = No; If not, what was his/her expertise in MI?
2. **Describe how you have developed your proficiency in MI other than through attending presentations or participating in workshops.** Emphasize experiences involving **directly observed supervision** of your MI delivery and any coding of your “counseling" on the MITI or similar instrument.
	1. Activity to Develop Proficiency - What ongoing learning activities have you engaged in? (E.g., One-on-One Coaching; Participating in coaching circles; Reviewing and discussing recorded MI sessions, etc.)
	2. Dates of Activity – When did these activities take place (month and year)
	3. Supervisor – if this activity was supervised, who provided coaching or supervision?
	4. Coding - Was your work coded? If so, which coding instrument was used (e.g., MITI, MISC, BECCI, etc.)
	5. Feedback summary – Please summarize 1-2 supervisor summaries that you received. And how did you incorporate this feedback into your ongoing learning? If your work was evaluated using a recognized MI coding instrument, summarize the results you received.
	6. **Since your initial training in MI, how have you continued to update your knowledge of MI, other than through attending workshops and presentations?** Include all forms of self-directed learning you have engaged in E.g., reading books, articles, reviewing research, viewing DVDs, participating in peer consultation, etc.? (In 150 words or less)
3. **Please describe the clinical or work context in which you have used MI.**
	1. Populations- With which populations have you used MI? (E.g., patients hospitalized for drug or alcohol problems, smokers, university students, inmates in prison, people on parole, people trying to lose weight, etc.)
	2. Settings - In what types of settings? (E.g., hospital, health or substance abuse clinic, university or school, criminal justice, community-based research, etc.)
	3. Dates - For how long have you used MI with these populations (years)
	4. Describe what **specific** challenges these populations or settings present, and how you have found MI to be helpful. Provide at least
	5. one example of how MI has enhanced your conversations with the individuals or groups you have worked with **(In 150 words or less)**
4. **To whom and in what setting(s) have you already, as a trainer, conducted MI trainings, or do you anticipate conducting MI training in the near future?**
	1. Dates - of anticipated MI training or MI training you have already conducted
	2. Context of Training – Briefly describe population, setting or other context of MI training (for both anticipated MI Trainings and Trainings you have already conducted)
	3. Were you lead, co-trainer or observer? Co-Trainer – Who will you be co-training with (or have you co-trained with in the past)
	4. Is co-Trainer a member of MINT? – Will your co-trainers be MINT members?
	5. Additional Comments (Optional - In 150 words or less)
5. **TNT Learning Plan –** Each participant accepted into the TNT will be expected to create an individualized learning plan. To begin this process, please identify 2 – 3 learning goals that you will aim to achieve through your participation in the TNT.

Please note that these goals must relate specifically to developing your skills **as a trainer** of MI rather than practicing the skills (and must be 150 words or less). Please consider your strengths and weaknesses as a trainer in considering your learning goals.

1. MINT prides itself in being an international organization that supports ongoing learning and skillfulness of its members by freely sharing information, resources and training experiences. MINT also values “giving back” to the community by encouraging members to generously offer their time and talents to help others learn, practice and train MI. Examples of such values may be “Giving back more than you receive from MINT” and “promoting learning through free sharing of resources”, “offering time in service to best practice development”.
	1. **In the space below, describe *why* you want to be part of the MINT organization,**
	2. **and *how* you will demonstrate these values as a MINT member.** (In 150 words or less)
2. **References -** Provide email and telephone contact information for **2 MI trainer(s)** who have provided **direct observation of your MI delivery** through supervision, training, coaching, feedback, etc., and who could describe your proficiency in the practice of MI. **These references MUST be familiar with your MI skills**, and not just someone who facilitated a workshop you participated in. Indicate if this trainer is a member of MINT. **LETTERS OF RECOMMENDATION ARE NOT REQUIRED.**

We **may** contact the persons you list for additional information. You **MUST** obtain permission from these individuals for us to contact them **BEFORE** providing their names and contact information.

# MINT logo.jpgApplicant Name:

# Language TNT being applied for (English/French):

English [ ]  French [ ]

**1. Have you ever applied for a MINT-sponsored or endorsed TNT workshop?**

 [ ]  **Yes** [ ]  **No**

If yes, in the space below, describe when, and explain the outcome of your application review. Include what you have done in response to the feedback you were given. (In 150 words or less):

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| **2.1 MI Training Format and Level** | **Experiential %****(vs. Presentation only)** | **2.2 Dates** | **2.3 Duration (Number of Hours)** | **2.4 Trainers** | **2.5 Trainers MINT Members?** |
|       |       |       |       |       | **[ ]  Y** **[ ]  N** |
|       |       |       |       |       | **[ ]  Y [ ]  N** |
|       |       |       |       |       | **[ ]  Y [ ]  N** |
|       |       |       |       |       | **[ ]  Y [ ]  N** |
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* 1. **Additional comments, if needed. If you have attended limited amount of formal training, how have you learned MI? (Optional – In 150 words or less)**

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|  | **3.1 Activity to Develop Proficiency** | **3.2 Dates** | **3.3 Supervisor** | **3.4 Coding Instrument** |
| 1 |       |       |       |       |
| 2 |       |       |       |       |
| 3 |       |       |       |       |
| 4 |       |       |       |       |
| 5 |       |       |       |       |

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|  | **3.5 Feedback Summary** |
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| 2 |       |
| 3 |       |
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| **3.6**       |

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| **4.1 Population(s)** | **4.2 Settings** | **4.3 Dates and Frequency** |
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| **4.4**       |

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| **5.1 Dates** | **5.2 Context of Training (population/setting)** | **5.3 Your role & Co-Trainer(s)****(Names)** | **5.4 Co-Trainer in MINT?** |
|       |       |       | [ ]  Y [ ]  N |
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| **5.5**       |

**6.**

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| **Goal 1:** |  |
| **Goal 2:**  |  |
| **Goal 3:**  |  |

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| 7.2       |

**8.**

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| **Reference Trainer (First, Last Name)** | **Email** | **Phone Number with area code** | **MINT Member?** |
| **1** |       |       |       | [ ]  Y [ ]  N |
| **2** |       |       |       | [ ]  Y [ ]  N |