Office of Recipient Rights Training Registration Form

Name: Title:

Agency: Date of Effective Employment:

Are you the Primary Rights Person? ☐ YES ☐ NO

Name of the Person You Replaced:

Are you the Alternate Rights Person? ☐ YES ☐ NO

Name of the Person You Replaced:

Address: City: Zip:

Email Address: Phone: Fax:

Name of the Person You Report to in your Rights Position:

His/Her Title:

His/Her Email Address:

Place an X in the box corresponding to each session you wish to register for:

Course Selection	JAN	MARCH	JUNE	AUG	NOV
Basic Skills Training, Part I	☐	☐	☐	☐	☐
	JAN	APRIL	JULY	SEPT	DEC
Basic Skills Training, Part II	☐	☐	☐	☐	☐
			MAY		SEPT
Building Blocks of Report Writing *You must have taken BST I & II 6 months prior to registering for Building Blocks			☐		☐
			APRIL	AUG	DEC
Developing Effective Training (DET)			☐	☐	☐

Please Note:

- **Dress for all sessions is casual.**
- **Morning and afternoon refreshments are provided; lunch is on your own.**
- **There is no cost to attend these sessions however, call within 72 hours if you unable to attend.**

Your session confirmation will be e-mailed once your registration has been received by our office.

TO REGISTER:

Print this form and fax it to: (248) 348-9963 or E-mail this form to: ryanv1@michigan.gov

To hear information on the status of a program, including last minute changes and cancellations due to weather, or for dates of the future trainings, visit our website www.michigan.gov/recipientrights or call 888-505-7007. For training-related questions, contact the Office of Recipient Rights, Training Division at 248-735-7091.

Overnight Accommodations: Whenever possible, we have made arrangements with the hotel for accommodations to be available at the current state government rate of $75.00/night + taxes, the night before and the nights of the training. You are responsible for making your own reservations, Please call the hotel for details. Make sure you indicate you are attending Basic Skills training and you are part of the MDCH Recipient Rights group.