



TCP Training User Guide

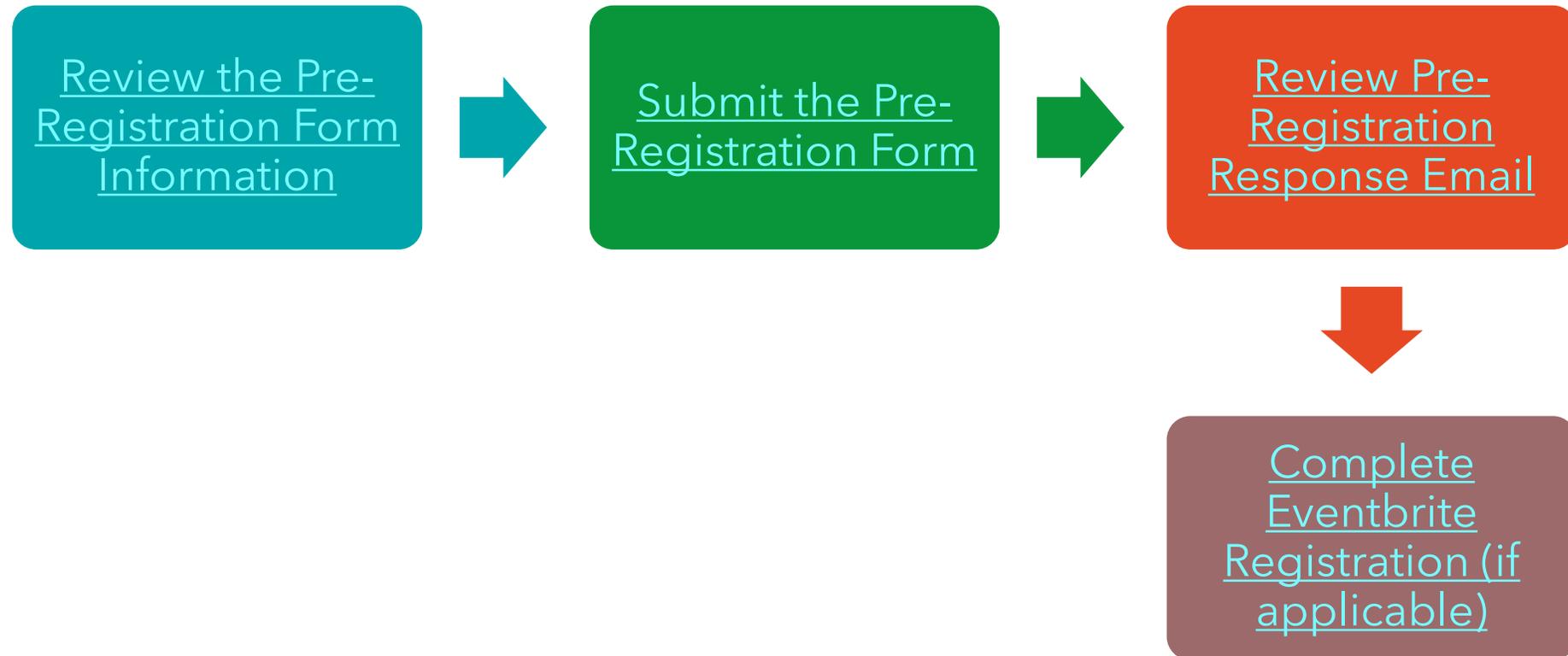


The Community Partnership
For the Prevention of Homelessness

Submitting Pre-Registration Requests

Steps in the TCP Training Pre-Registration Process

[Note: Click the links below to review each step](#)



Review the Pre-Registration Form Information

Read pre-registration instructions before completing the form.

Check the Event Name, Date/Time, and Current Status before submitting the form.

If the Event Name or Date/Time aren't correct, check to make sure you are using the correct link.

If the Current Event Status is set to **Closed**, the event is full and will not accept additional registrations.

If everything looks correct, you may proceed with submitting the form.

TCP Training Registration Request

Instructions - PLEASE READ CAREFULLY -

Review the event name, date and time below to ensure you are requesting registration for the correct training.

Once you submit this form, the system will determine if there are still spaces available in the training. If there is still space available, you will receive an email with additional information regarding the training.

If there are no more spaces available, you will receive a message indicating the training is full. If spaces open back up, you will receive an email to register for the training.

Event Name

Mental Health First Aid Training

Event Date and Time

06/22/2021 11:00:00

Current Event Status

Open

Your First Name

Your Last Name

Your Work Email Address (personal email addresses will not be accepted) *

Your Job Title

Your Agency

Your Program

Next Page

Submit the Pre-Registration Form Information

Enter the following:

- Your First Name
- Your Last Name
- Your Work Email Address
- Your Job Title
- Your Agency
- Your Program

Note: if you enter a personal email address (e.g. google, yahoo, etc.) the system will deny your request.

Click Next Page

TCP Training Registration Request

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Event Name	Event Date and Time
Mental Health First Aid Training	06/22/2021 11:00:00

Current Event Status
Open

Your First Name	Your Last Name
<input type="text"/>	<input type="text"/>
Your Work Email Address (personal email addresses will not be accepted) *	
<input type="text"/>	
Your Job Title	
<input type="text"/>	
Your Agency	Your Program
<input type="text"/>	<input type="text"/>

Next Page

Submit the Pre-Registration Form Information

Review the training requirements and description.

Click the check box to confirm you have read and understand the training requirements and description.

Click Submit

TCP Training Registration Request

Training Requirements and Description

Training Requirements and Description

Please note that this is a pre-registration page and registration consists of two parts. Upon successful completion of this form, you will receive an email containing an Eventbrite link and password, which MUST be used to fully complete the registration process for Mental Health First Aid training.

Mental Health First Aid (MHFA) is a 6.5-hour course. MHFA uses role-playing and simulations to demonstrate how to offer initial help in a mental health crisis and connect persons to the appropriate professional, peer, social, and self-help care. The program also teaches the common risk factors and warning signs of specific types of illnesses, like anxiety, depression, substance use, bipolar disorder, eating disorders, and schizophrenia. Mental Health First Aid is included on the Substance Abuse and Mental Health Services Administration's National Registry of Evidence-based Programs and Practices (NREPP). All trainees receive a program manual to compliment the course material and will receive a certificate issued by Mental Health First Aid USA. Mental Health First Aid is designed to provide an overview of mental health (including addiction) issues for staff so they can recognize and become more aware of their clients' mental health needs to triage and referral of services.

CEUs are available for this training.

Please note that you must register yourself and cannot register for more than one date. TCP will be monitoring the registration page and anyone found to have registered for more than one date will have all reservations canceled. If you are a supervisor, please have your staff reach out to TCP directly with the requested information independently; staff need to confirm that they will complete the work and not supervisors.

A limited number of spaces are available for each training session. Any person who registers and fails to complete the required course work within 7 days in advance of the training and/or joins the training late (15mins), will not be eligible to register for this training again until 60 calendar days after the missed training session.

By checking this box, I confirm that I have read and understand the requirements for participation in this training.

[Previous Page](#) [Submit](#)

Review the Pre-Registration Form Response Email

You will receive a response at the email address you provided.

The response will indicate if you are approved to proceed with registering for the training.

If you are denied, the email will indicate the reason.

Please read the response emails very carefully as they contain critical follow up steps.

TCP Training Registration Approved

TT TCP Team <contact@community-partnership.org>
To Clarence Landers 3:17 PM

Hello Clarence,

You have **successfully completed** the Pre-Registration Form. You must use the **Eventbrite link and password** below to fully register for the training. Please note that if you do not complete the later process noted, you will not be registered for this training.

You submitted a registration request for the following event: Mental Health First Aid Training

Your request has been approved and the Eventbrite registration link and password are below.

Link: <https://www.eventbrite.com/e/virtual-mental-health-first-aid-all-staff-tickets-151809439119>

Password: MH\$521

If you have any questions or concerns, please send an email to wgordon@community-partnership.org or ctraylor@community-partnership.org.

Have a great day!

TCP Training Team

*Attachments and Additional Instructions (if applicable, if not will be blank)

[Mental Health First Aid - After the Training](#)

[How to Access Pre-Course Work in your Transcript](#)

[First Aid Experience Guide](#)

TCP Training Registration Request Denied Inbox x

TCP Team contact@community-partnership.org via unkfk2y2e77c02.4p-js9tuaq.na132.bnc.salesforce.com to me

Hello Clarence,

Your training registration request was **denied**. Please see below for additional details.

Training Name: Mental Health First Aid Training

Valid Email Address Used: No

Remaining Spaces in Training: 25

If "No" is indicated next to valid email address used and there are remaining spaces in the training, you may resubmit your request using a valid work email address (note: do not use email addresses from yahoo, google, aol, etc.)

If the remaining spaces in training is "0", the training is full and cannot accept additional registrants. Please contact Wesley Gordon (wgordon@community-partnership.org) or Charlene Traylor (ctraylor@community-partnership.org) to inquire about additional trainings.

Thanks,

TCP Training Team

Complete Registration via Eventbrite

Click the Eventbrite registration link in the approval email.

Enter the provided password on the Eventbrite page to complete your event registration.

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TCP Team <contact@community-partnership.org>
To: ✓ Clarence Landers 3:17 PM

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FRI, MAY 14 AT 9:00 AM

Virtual Mental Health First Aid (All Staff)

by The Community Partnership for the Prevention of Homelessness

Password Required

This Event Has Ended

Contact Organizer