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**Sponsorship Package Information**

**What you need to do when running groups**

As part of the Parents Plus Sponsorship **for training**, you the facilitator give a commitment to:

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| * Run at least two groups in whichever Programme/s trained in within an 18 month period from time of training. These groups are run in accordance with Parents Plus Quality Protocol and in compliance with Parents Plus Licensing Guidelines. * Contact Parents Plus in advance when these two groups are run, with details of the recruitment plan for parents. * Follow the Parents Plus Protocol and participate in post training supervision. * The following information in relation to **each** of the 2 groups is copied and posted to Parents Plus:   **After first group session;** Copies of:   * Attendance sheet with list of parents/young people * Each of the Parent/Young Person Goal Form and Session Rating Forms. * Facilitator Session Planning and Review Sheet * Facilitator Quality Checklist for each Facilitator   **After last group session;** Copies of:   * Group Attendance Sheet, * Parent/Young Person Goal Review Form, * Parent/Young Person Course Review Form. * Facilitator Course Review Form     **After 2-3 month follow up session:**   * Group Attendance Sheet, * Goal Review Form. |

### ***Please note:***

### All forms should be anonymised when returned to Parents Plus. It is a good idea to ask parents to fill in forms using initials only. Remember to keep a copy of any forms for your service and for any future accreditation submission.

**In return for completing these requirements**

As part of the Parents Plus Sponsorship for training you, the facilitator, will receive **up to a maximum of** 50% discount on :

* Facilitator Training.
* Facilitator Programme materials
* Parent book for the first group run. These will be despatched once the group has been organised.

In addition, Parents Plus will provide for free

* A free preparatory call with a Parents Plus trainer in advance of commencement of first parent group.
* One individual supervision for the co-facilitating pair.

**I accept the sponsorship conditions above.**

**Name of Programme:**

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**Name of Facilitator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Co-Facilitator \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**