



HIV/Aids Support Group Training Booking Form

Dates: 25th - 29th March 2019
Times: Mon - Friday- 9:00 - 16:00
Venue: Somerset West

Coordinators: Philippi Trust SA
Training Department: 074 181 5488/ 083 374 1619
E-mail: chantal@philippitrust.co.za

BOOKING FORM:

I wish to attend the **HIV/Aids in Support Group Training:**

Full Name.....

Address.....

Tel:

Fax:

Email.....

Cost: The cost of the course is R1800. A non- refundable deposit of R600, with the booking form, will secure your place on this course. The balance of the fees is due by the first day of the course or by prior arrangement with the convener. Please send a proof of payment if you pay by internet. The cost includes, lectures, manuals and certification. Tea and coffee with biscuits will be provided.

COURSE CONTENT:

This is a 50 hour support group course consisting of:
40 contact hours in lecture room
10 hours for journal, reading,
project preparation

This Course Covers:

- Determine the purpose of a support group.
- Establish who would benefit from attendance.
- Understand what aspects are key to introducing and maintaining a viable and resilient group.
- Equip facilitators with key principles to protect confidentiality and integrity of participants.
- Develop core skills of the facilitator.
- Improve self awareness of facilitator.
- Determine different types of support group.
- Establish what type of group is most appropriate to which group of people.
- Understand the dynamics of different people.
- Understand the dynamics of group work.
- Dealing with conflict.
- Implement skills learned through presentations.
- Plan a working model of a support group.
- Keys to building a support network in a community.
- Establish what key elements are required to protect the emotional health of a facilitator.
- Importance of mentorship.

Training Agreement:

I/we agree to:

1. Attend all the training sessions or be willing to refund any costs incurred if absent.
2. Actively participate in the learning process.

Signed by Trainee:

NGO Manager/
Coordinator/Reference:.....

Name of Organisation or Church:.....

Tel Number:.....

Participants should have training in or a working understanding of the following:

- HIV/Aids Awareness
- Basic Counselling skills
- Recognised leadership qualities
- Read and write in English

Please note that once a place has been allocated to you, you will be expected to attend all five days. There are a limited number of places and non arrival or partial attendance means someone else is denied the opportunity to learn. No refunds will be given.

WHAT WILL BE PROVIDED:

- Tea and coffee (plus snack)
- Course Manual
- Trainer/s
- Safe venue
- Project tools

Learners are requested to:

- Bring their own pens, pencils, scrap paper
- Arrange transport to and from venue
- Be willing to be involved in implementing support

Bank Details:

Bank Name: Nedbank
Account Name: Philippi Trust SA
Account Number: 9020501014
Branch Code: 114145
Reference: (Student Name) S/Group

Philippi Trust, P.O. Box 3880, Somerset West 7129
No 28 Bright Street, Somerset West
Tel : 074 181 5488
office@philippitrust.co.za
#015-794NPO

