

Facilitator-in-Training Verification Checklist

This checklist is intended to serve as a guide for Facilitators-in-Training and their Coaches to ensure that all requirements for certification are met prior to submitting the official application. For a full explanation of all requirements for certification please see the NM High-Fidelity Wraparound Program Manual & Implementation Guide. This document, along with all supporting documents, will be uploaded with Facilitator Application for Certification online form. Acceptance or denial of application will be communicated to the applicant within 30 days via letter. Upon approval, applicant will be scheduled to sit for exam.

Facilitator in Training Name: _____

Coach Name: _____

The following High-Fidelity Wraparound criteria for Wraparound Certification have been met. FITs must complete all requirements within 6-12 months

Initials	Requirement <i>Upload copies of all certificates where applicable</i>	Date Completed
Orientation and Training Requirements		
	Facilitator-in-Training Application (enrollment)	
	Pre-Requisite E-learning Modules	
	Foundations of Wraparound Practice Training	
	Follow-up Training I: Documentation, Safety and Stability	
	Follow-up Training II: Engagement, Teaming and Conflict Resolution	
	Follow-up Training III: Deepening Our Understanding of Vision, Needs and Benchmarks	
	Follow-up Training IV: Ethics Across the System of Care for Certified and Credentialed Professionals	
	Child and Adolescent Needs and Strengths (CANS) Certification <i>(required for those that began FIT track on or after 4/1/2023)</i>	
	Fidelity & Outcomes Measurement Evaluation Training	
Coaching & Fidelity Monitoring Requirements		
	60-hours of Coaching by an Endorsed Wraparound Coach <i>You will upload signed coaching logs</i>	
	Implemented the NM Wraparound model with a minimum of three enrolled youth/families within the 12-month period. List evaluation IDs of 3 youth/families: _____ , _____ , _____	
	Complete a minimum of <u>3</u> Team Observation Measures (TOM)s & <u>2</u> Wraparound Fidelity Index (WFI)s within the 12-month training period. <i>(Will be verified in WrapStat)</i> TOM Dates: _____ , _____ , _____ WFI Dates: _____ , _____	
	Met or exceeded all of the competencies outlined in the Facilitator Evaluation Form. <i>Will be submitted by coach.</i>	
Letters of Reference		
<i>In your electronic application you will provide the name and email of your 3 references, they will be sent a reference form to complete. Please inform your references and ask them to return the form timely.</i>		
	Reference from Peer/Colleague	
	Reference from outside agency with whom you have worked in a Wraparound setting	
	Reference from Wraparound Coach	