**FORM A: Program Assistant Application for 6-Session Level 1 Trainings**

*(trainings without Overnight/Commuter arrangements)*

1. Please don’t apply to be a Program Assistant (PA) in this training if you have a dual/multiple relationship with the training’s Lead Trainer, Co-Lead Trainer, Guest Trainer, Assistant Trainer, Lead Trainer Mentee, and/or Assistant Trainer Mentee.

2. To apply to be a Program Assistant (PA) in this training, you must:
   
   A. Already have earned the Certificate of Completion from a Level 1 IFS training program;
   
   B. Not apply to be a participant in this training;
   
   C. Complete this form and submit it to IFS Institute (use contact information above), even if you’ve been a PA before or have spoken with a trainer about being a PA for this training. You may contact IFS Institute to confirm that we received your PA application ([training@IFS-Institute.com](mailto:training@IFS-Institute.com)).

3. PAs are selected by each program’s trainers. PA applicants are notified by trainers about being chosen or not. Trainers may select some PAs before the application deadline, and/or shortly before the training begins. You may not hear from trainers about being selected until about two weeks before the training begins. Please contact the trainers if you have questions. Contact information is in the website’s “About Us – Trainers” and/or “Find a Professional” listings.

4. A separate PA application is required for each training you apply for. PA applications from other trainings, or forms you create on your own, will not be accepted.

5. PA spaces are limited, and we recommend that you apply early.

6. For all the details about the training, including dates, daily schedules, location, lodging options, and more, please review the training’s website brochure.

7. If you accept a PA position in another IFS training after submitting this application, you are required to inform the Lead and Assistant Trainers of this training. Contact information is in the website’s “About Us – Trainers” and/or “Find a Professional” listings.

8. PA Stipends
   
   A. Only experienced PAs receive stipends. An experienced PA is someone who has served as a Level 1 or Level 2 PA for an entire training that has already ended by the starting date of the new training.
   
   B. Daily stipends are paid for each full day an experienced PA is present. Stipends are not paid for training days with 2 or fewer training hours, days that are partially attended, or days a PA is absent.
   
   C. All experienced PAs are paid the same daily stipend amount in a particular training.
   
   D. The daily stipend amount is US$55/day/experienced PA.

9. Program Assistants may not make audio or visual recordings or take photographs of any part of any IFS training session, or use services such as Skype, Zoom, FaceTime, etc., to transmit or receive any part of any IFS training session.

10. If a Program Assistant receives a complaint from a participant about a training, the Program Assistant is required to handle it according to IFS Institute’s Grievance Policy as posted at [www.IFS-Institute.com](http://www.IFS-Institute.com).
IFS Institute, Inc.

Submit PA Application to:
P.O. Box 3969, Oak Park, Illinois 60303
Fax: 708.383.2399 Email: training@IFS-Institute.com

FORM A: **Program Assistant Application for 6-Session Level 1 Training**
*trainings without Overnighter/Commuter arrangements*

Training City___________________________________________________________
Training 3-digit number (available on the training’s website page)_______________________

1. **Your contact information (print neatly so we can read it!)**
   
   First Name___________________________________________________________
   Last Name___________________________________________________________
   Credentials___________________________________________________________
   Street Address_________________________________________________________
   City, State, Zip Code___________________________________________________
   Phone (H)____________________________________________________________
   Phone (W)____________________________________________________________
   Phone (C)____________________________________________________________
   Email________________________________________________________________

2. **Please list any other names you have used in the past:**
   ______________________________________________________________________
   ______________________________________________________________________
   ______________________________________________________________________

*If necessary, use a separate sheet to answer the remaining questions, and then attach it to your application. Please write clearly and use black ink so we can read it.*

3. **If accepted, will this be your 1st, 2nd, 3rd time, or more, as an IFS training PA?**

   1st time___ 2nd time___ 3rd time___ 4th time___ 5th time___ 6th time___ More___

4. **Tell us about each completed IFS Level 1 and Level 2 training in which you have been a PA.**

   City_________________________________________ Year________ Program Number_______
   Lead Trainer Name(s)_________________________________________________________________
   Assistant Trainer Name_________________________________________________________________

   City_________________________________________ Year________ Program Number_______
   Lead Trainer Name(s)_________________________________________________________________
   Assistant Trainer Name_________________________________________________________________
5. **Experienced PAs**: An experienced PA is someone who has served as a Level 1 or Level 2 PA for an entire training that has already ended by the starting date of the new training.

   ______ Check here if you are an experience PA.

6. **Tell us about all Level 1, 2, and 3 training(s) from which you have already earned a certificate of completion.** To apply to be a PA, you must already have graduated from a Level 1 training.

   City_________________________ Graduation Date_______________
   Lead Trainer Name(s)___________________________________________
   Assistant Trainer Name_________________________________________

   City_________________________ Graduation Date_______________
   Lead Trainer Name(s)___________________________________________
   Assistant Trainer Name_________________________________________

   City_________________________ Graduation Date_______________
   Lead Trainer Name(s)___________________________________________
   Assistant Trainer Name_________________________________________

   City_________________________ Graduation Date_______________
   Lead Trainer Name(s)___________________________________________
   Assistant Trainer Name_________________________________________

7. **Are you currently a PA in an IFS training?** Yes_____ No_____

   If “yes”, please tell us its:

   City_________________________ Training Number______________
   Starting Date______________________ Ending Date______________________
8. Have you been accepted, and agreed to be a PA for a future IFS training? Yes_____ No_____
   If “yes”, please tell us its:
   City________________________________________ Training Number_________________
   Starting Date_________________________ Ending Date________________________

9. List all previous IFS events you have attended, such as workshops, consultations groups, conferences, etc., along with names of facilitators, workshop leaders, or trainers for each one.

_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

10. Comment on the following experiences you have had: IFS trainings, workshops, retreats; clinical trainings and experiences; teaching, training, clinical supervisory, and group leadership.

_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

11. Detail your reasons for wanting to be a PA and your qualifications for and/or constraints in doing so. Please refer to the Program Assistant requirements, responsibilities, and competencies listed at www.IFS-Institute.com.

_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

12. Have you participated in the IFS Conference Program Assistant Workshop, Building Confidence and Competence: Honing Skills for More Mastery as a Program Assistant? 
   No_______ Yes_______ Participation Year _______________

13. Can you attend all days of this training? Yes_____ No_____
   If “no”, please list all the days that you cannot attend.

_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

14. What is your native language? _________________________________

15. List any other languages in which you are fluent. _________________________________

16. Do you have any special needs? If so, please explain.

_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
17. Sign the Dual/Multiple Relationship Policy and Code of Conduct below and return them with your PA application. Your PA application cannot be considered unless you return a signed Dual/Multiple Relationship Policy and Code of Conduct.

**Before you submit your application, please:**

- **Review it** to make sure it’s complete. Incomplete forms cannot be processed.
- **Sign** the Dual/Multiple Relationship Policy and Code of Conduct below.
- **Copy or save your application** for your records – most people eventually need it.
- **We cannot accept photos of your application.**

*Thank you for your interest in IFS Institute’s training.*
IFS Institute, Inc.

Dual/Multiple Relationship Policy for
Training Staff Members in
Level 1, 2, and 3 Internal Family Systems℠ (IFS℠) Training Programs
Organized by IFS Institute, Inc. (IFSI)

Definitions:

Trainer – For the purposes of this policy, any Lead Trainer, Co-Lead Trainer, Guest Trainer, Assistant Trainer, Assistant Trainer Mentee, Program Assistant, and other person(s) teaching at an IFS Level 1, 2, or 3 training program organized by IFS Institute, Inc. (IFSI).

Participant – For the purposes of this policy, anyone who is a student in an IFS Level 1, 2, or 3 training program organized by IFSI.

Roster – The document generated by IFSI for each training that may list training applicants, accepted training participants, trainers, and their personal information. Rosters are routinely updated with additional applicants, participants, and trainers.

1. Different states, provinces, and other governmental jurisdictions may have different policies regarding dual/multiple relationships for counselors, therapists, and other professionals for whom dual/multiple relationships may exist. Therefore, trainers are expected to take responsibility for checking with their particular and applicable governing policies, and for adhering to the professional standards for dual/multiple relationships outlined therein. Trainers are also expected to adhere to the governing policies of their professional disciplines regarding dual/multiple relationships.

2. It is IFSI’s policy that a trainer may not enter into a therapeutic or supervisory relationship with a training participant or other trainer in their training until the training is completed. Trainers are expected to adhere to the professional standards as in paragraph 1 above if those standards are more stringent or comprehensive than IFSI’s.

3. IFSI is committed to maintaining the safety of its highly experiential IFS training programs. To that end, IFSI is sensitive to the potential difficulties of any type of dual/multiple relationship between trainer and trainer, or trainer and participant. Therefore, IFSI requires Lead Trainers, Co-Lead Trainers, Assistant Trainers, Guest Trainers, and Assistant Trainer Mentees, to review all applicants for their trainings to determine if they are in dual/multiple relationships with any of them.

If you, as a Lead Trainer, Co-Lead Trainer, Assistant Trainer, Guest Trainer, or Assistant Trainer Mentee, believe you are in a dual/multiple relationship with anyone that involves privileged communication, particularly (but not only) supervisory or therapeutic, you must contact the other person(s) and resolve the situation in accordance with this policy before the training begins, and thoroughly work out how the dual/multiple relationship will be managed through the end of the training. IFSI acknowledges that dual/multiple relationships that involve privileged communication are confidential and, therefore, IFSI cannot be responsible for resolving them or for their existence in its training programs.

4. If you, as a Lead Trainer, Co-Lead Trainer, Assistant Trainer, Guest Trainer, or Assistant Trainer Mentee, believe you are in a dual/multiple relationship with anyone that does not involve privileged communication, you may either contact the other person(s) and resolve the situation in accordance with this policy before the training begins, or contact your Lead Trainer before the training begins.

If a participant or trainer is going to be asked to withdraw from a training in order to resolve a dual/multiple relationship that does not involve privileged communication, and that person is dissatisfied with being asked to withdraw, then at that time the Lead Trainer will send an email to IFSI’s Executive Director, and simultaneously send a copy of that email to IFSI’s Director of Staffing and Training Program Coordinator for their information. The final decision about how to handle a dual/multiple relationship that does not involve privileged communication rests with IFSI’s Executive Director.
5. If any trainer wants to disclose their dual/multiple relationship to other trainers in their training, then the trainer with a dual/multiple relationship must have a signed agreement with the person with whom they have a dual/multiple relationship granting permission for such disclosure.

If any trainer wants to disclose their dual/multiple relationship to participants in their training, then the trainer with the dual/multiple relationship must have a signed agreement with the participant with whom they have a dual/multiple relationship granting permission for such disclosure. These written agreements must be provided, secured, and held by the trainer, and are not the responsibility of IFSI. These written agreements must be completed before the training begins.

6. If you are a Lead Trainer, Co-Lead Trainer, Guest Trainer, Assistant Trainer, or Assistant Trainer Mentee, you must access your trainings’ rosters on IFSI’s file sharing system when you need to know more about who is involved with your trainings.

7. Dual/Multiple Relationships Involving Program Assistants, and Assistant Trainers’ Responsibility for Sharing Rosters with Program Assistant Applicants

   a. Anyone who has a potentially problematic dual/multiple relationship with a training’s Lead Trainer, Co-Lead Trainer, Guest Trainer, Assistant Trainer, and/or Assistant Trainer Mentee is discouraged from applying to be a Program Assistant in that training.

   b. Assistant Trainers must share their trainings’ current rosters with Program Assistant applicants before Program Assistants are chosen so they can screen for dual/multiple relationships.

   c. Assistant Trainers must share their trainings’ current rosters with Program Assistants who have been chosen so they can screen for dual/multiple relationships, and this must be done every 2-3 weeks thereafter, during the time before the training begins.

   d. If a Program Assistant has a dual/multiple relationship with a participant that involves privileged communication, and the dual/multiple relationship is potentially problematic such that it cannot be ethically managed within the training (as determined by those in the dual/multiple relationship and in accordance with IFSI’s dual/multiple relationship policy), then the Program Assistant is required to withdraw from the training.

   e. If a Program Assistant has a dual/multiple relationship with a participant that does not involve privileged communication, then the Program Assistant may either contact the other person(s) and resolve the situation in accordance with this policy before the beginning of the training, and thoroughly work out how the dual/multiple relationship will be managed through the end of the training, or contact the Lead Trainer. If a participant or Program Assistant is going to be asked to withdraw from a training in order to resolve a dual/multiple relationship that does not involve privileged communication, and that person is dissatisfied with being asked to withdraw, then at that time the Lead Trainer will send an email to IFSI’s Executive Director, and simultaneously send a copy of that email to IFSI’s Director of Staffing and Training Program Coordinator for their information. The final decision about how to handle a dual/multiple relationship that does not involve privileged communication rests with IFSI’s Executive Director.

By signing below, I agree to abide by the terms of this dual/multiple relationship policy for all IFSI-organized IFS training programs in which I am a trainer, now and in the future.

___________________________________ ____________________________
Signature Printed Name

___________________________________
Date

The Center for Self Leadership, Inc. DBA IFS Institute, Inc. 7.25.17; updated 1.16.20 IFSI name
IFS Institute, Inc.

Code of Conduct
for
Events and Activities Organized by IFS Institute, Inc.

Definition:
"Members" of IFS Institute’s events and activities: Anyone who participates in, observes, teaches, or otherwise attends IFS Institute-organized training programs, conferences, webinars, teleconferences, workshops, online communities, or other functions.

IFS Institute requires that Members of its events and activities create and maintain a harassment-free event environment, regardless of gender, gender identity, gender expression, sexual orientation, ability, physical appearance, body size, race, age, religion, or nationality. Harassment includes, but is not limited to:

- Aggressive or hostile verbal comments and other behavior that reinforces social structures of domination related to gender, gender identity, gender expression, sexual orientation, ability, physical appearance, body size, race, age, religion, nationality
- Displaying or allowing to be displayed sexual images in public spaces
- Deliberate intimidation or stalking
- Unwanted or uninvited photography or recording
- Sustained disruption of IFS Institute events or activities
- Inappropriate physical contact
- Unwelcome sexual attention
- Advocating for or encouraging any of the above behavior

We expect Members of each event or activity organized by IFS Institute to abide by this Code of Conduct. IFS Institute reserves the right to pursue appropriate legal remedies or removal from IFS Institute events for any failure to abide by this Code of Conduct.

Training Program Purpose and Confidentiality

While IFS training programs contain experiential components, training programs are not psychotherapy sessions. All program components, including those that are experiential in nature, are for the purpose of teaching people to use the IFS model. Therefore, the interactions and information shared by Members are not privileged communications as they might be during actual therapy sessions. IFS Institute invokes training member confidentiality as long as disclosures of information at training programs (1) do not compromise anyone’s safety, health or well-being, and/or (2) do not compel that the disclosed information be reported to appropriate law enforcement or regulatory
The various professional and licensing organizations, as well as states, provinces, and other governmental jurisdictions, may have different policies regarding confidentiality for counselors, therapists, and other professionals; Members are responsible for knowing their particular and applicable governing policies, and for adhering to their professional standards for confidentiality if they are more stringent than IFS Institute’s requirements.

**Reporting a Code of Conduct Violation**

To report a violation of this Code of Conduct, please follow the procedures in the Grievance Policy at IFS-Institute.com FAQ page.

**Online Community Purpose**

Our online community platforms, including but not limited to Facebook Groups, provide forums for shared experiences using the IFS model. In addition to the Code of Conduct, we have the following participation guidelines:

- **Promotional posts:** We will provide prompts to allow you to comment with any offers, products, or services you have available to the community. Please refrain from individual posts advertising for personal gain.

- **Clinical consultation:** No one may post information that could potentially breach client confidentiality.

- **Medical disclaimer:** Online communities are not substitutes for clinical diagnosis or treatment, nor is the information provided intended to replace consultation with a qualified health-care provider. If you’re in crisis, please contact your local emergency services.

Please note the opinions and content on community group pages do not represent IFS Institute, nor do they necessarily represent the IFS model.

**If you have any questions about online community issues, please contact Sara Oberg. Contact information is at** [www.ifs-institute.com](http://www.ifs-institute.com).

**By signing below, I agree to abide by the terms of this code of conduct for all IFS Institute-organized IFS training programs in which I am involved, now and in the future.**

______________________________  ______________________________
Signature                                   Printed Name
______________________________________
Date

The Center for Self Leadership, Inc. DBA IFS Institute, Inc.  12.24.19; update 1.16.20 IFSI