MI-AIMH EARLY CHILDHOOD MENTAL HEALTH ENDORSEMENT (ECMH-E®) REFERENCE FORM APPLICANT'S WAIVER CERTIFICATE

Name of MI-AIMH Applicant:	Please Print:	(Last)	(First)	
	rieuse Frini.	(Last)	(FIISI)	
TO THE APPLICANT: You may about you in accordance with The I certificate.				
I waive, relinquish and disclaim a	ıll my rights to ha	ve access to the	Professional Reference For	m for MI-AIMH Endorsement®
Applicant's Signature			Date	
	PROFESSIO ® AS AN EAR	NAL REFEI	INFANT MENTAL HE RENCE FORM FOR IOOD MENTAL HEAI MHM-P)	
To be completed by supervisor/men	ntor/consultant/te	acher/colleagu	e (circle).	
Name of individual serving as refer	ence:	(3 7	
Category of Endorsement® for whi	ch individual is a	pplying:	X	
You have been selected to complete Michigan Association for Infant Me applicant's eligibility for MI-AIMI the applicant. It is not necessary to applicant's knowledge & skill base applicant does not waive his or her with the applicant, if requested. The professionals promoting infant and	ental Health (MI- I Endorsement®. have directly obs d on his/her descr rights to have acc ank you for your	AIMH). The in: Please provide erved the appli- iptions, affect, ess to this Refe contribution to	formation that you provide varieting on each item based cant perform his/her role if reflections, and changes over ence Rating, the information	will help to establish the on the context of your work with you are familiar with the or time. Please note that if the on you provide may be shared
For more information about the Enc click on Endorsement.	dorsement® requi	rements and Co	ompetency Guidelines®, plea	ase go to www.mi-aimh.org and
K				
Name of Applicant:				
Applicant's Address:				
Applicant's Daytime Telephone (i	including area coo	le):		

The rating scale is:												
0 – I do not have et 1 – Minimal Abilit 2 – Below Average 3 – Average Abilit 4 – Above Average 5 – Exceptional Ab	y e Ability y e Ability	formation	n to rate/c	comment								
Theoretical Found 1. Demonstrates kn		e of and o	ommuni	cates to o	thers kno	wledge in 1	the areas	of nregns	nev nre	natal dev	elonment	and earl
parenthood roles. (thers kno	wiedge iii	ine areas	or pregne	mey, pre	ilatai ucv	cropment	and carr
0	1	2	3	4	5					4		
2. Demonstrates keep behavior within a r									arly child	hood de	velopment	and
3. Develops or implied health interventions							or effecti	veness of	f infant a	nd early	childhood	mental
0	s. (<i>Injuni</i> 1	7 Toung (2	3	nuy Ceni 4	5	iice)						
4.0										,		
4. Supports and pro Focused Therapeur			at reinfoi	ce and nu	arture the	caregiver-	ıntant/ yo	oung child	d relation	ship. (R	elationshi	p-
0	1	2	3	4	5	3			,			
5. Has knowledge				lopment.		Relationshi	ips & Dyn	namics)				
0	1	2	3	4	5							
6. Demonstrates ki relationship contex professionals. (Atta 0	t; recogn	izes risks	s related t	o historie	es of sepa	erging com ration, trau	petencies ma, and/o	of the in or loss tha	fant/ you at may re	ing child equire ass	within a sistance of	other
7. Applies understa					nmunicate	effectivel	y and esta	ablish pos	sitive rela	ationship	s with a w	ide rang
of people and organ	nızatıons 1	. (Cultu 2	ral Comp 3	oetence) 4	5							
V	1											
8. Promotes inform												ntal
delays and/or emot	ionai dis	2	in intano	young ci	nnaren se 5	rvices. (L	nsoraers	oj injanc	y/Eariy (ınııanoo	<i>a</i>)	
9. Supports and prostrengths, resources												
10 Undanstanda an	d manna	taa in nal	i	tad diaam	antin ton	la amd alass	ification	arratama a	fam adıılı	mantal d	liaandana a	m d
10. Understands an substance abuse. (is and class	sincation	systems	ior aduit	memai c	iisorders a	IIQ
0	1	2	3	4	5							
11. Promotes, deve other opportunities	to educa											
Theory & Practice 0	1	2	3	4	5							
12. Encourages use		_	_		_	d mental h	ealth prac	etice. (Sta	atistics)			
0	1	2	3	4	5							

13. Faci body of	litates mor knowledg 0	nitoring a e on infar 1	nd evalua nt mental 2	ntion of se health, ea 3	ervice pro arly devel 4	seess and outcomes OR promotes research projects intended to increase the lopment, and effective interventions. (<i>Research & Evaluation</i>) 5
	egulation, nonstrates 0		notes beha	aviors tha 3	t reflect t 4	the Endorsement® Code of Ethics. (Ethical Practice) 5
	young chil	dren and	families (provisions and requirements of federal, state, and local laws affecting ion, child protection). (Government, Law, & Regulation)
	ions and re					encies, service systems, legislative bodies, and programs, develops s and best interests of the infant/young child within the context of family.
(лденсу	0	1	2	3	4	5
17. Utili		ert know			l delivery	systems and community resources to make decisions and
recomm	endations. 0	(Service 1	Delivery 2	Systems)	4	5
18. Und informa	erstands the supports.	ne service (<i>Commu</i> 1	s availabl nity Reso 2	le through urces) 3	n formal s	service delivery systems, through community resources, and through
19. Pror		developm				I informally observe the parent(s) or caregiver(s) and infant/young child to
	0	1	2	3	4	tal strengths, and capacities for change. (Observation & Listening) 5
	notes infartic tools 0				ice syster	m delivery that includes screening, referral assessment and use of
	aregiver, a					ssionals to respond with emotional sensitivity to the infant/young child, the oting and enhancing social and emotional well-being. (<i>Responding with</i>
	0	1	2	3	4	5
22. Adv (Advoca	ıcy)	services				aild(ren) and families and encourages the use of data to improve practice.
23. Den	0 nonstrates	I ability to	2 recognize	3 e environi	4 mental an	5 ad caregiving risks to the health of the infant/young child and parents and
	propriate a			3	4	5
						a service system delivery that includes assessment, development of trusting seatment Planning) 5
						d professionals can do to promote health, language, and cognitive mental Guidance) 5
						ntal competence in facing challenges, resolving crises and reducing ic needs and familiar conflict. (Supportive Counseling)

	0	1	2	3	4	5
27. Prom parent-in	otes infan fant/young 0	t and you g child in 1	ng childl tervention 2	nood ment ns. (<i>Pare</i> 3	tal health ent-Infant/ 4	service system delivery that includes relationship-based therapeutic / Young Child Relationship-based Therapies & Practices) 5
28. Prom	otes reflec	etive supe 1	ervision.	(Reflectiv	ve Supervi 4	ision) 5
29. Build and com	nunity rep 0	ntains eff oresentati 1	ves, and/o	or legislat 3	tors, as the	aships with a broad range of people including families, colleagues, agency e individual role requires. (Building & Maintaining Relationships)
	ing Others		2	s across a	agencies i	n promoting services for infants/young children and their families. 5
31. Provi Mentorin		nce and fo	eedback t	to novice	staff, grad	duate students, and other colleagues as requested. (Coaching and
32. Activ	ely partici				rely with i	interagency teams, planning committees, and ongoing work groups.
33. Demo	Ü				•	"win-win" solutions to conflicts. (Resolving Conflict) 5
34. Intera	octs with o	ther prof	essionals 2	in a tactf	ul and und	derstanding manner. (Empathy & Compassion) 5
	onstrates a				dents qui	ckly with the objective to eliminate the crisis and restore calm and order
	0	1	2	3	4	5
taking in	to account	needs, g	oals, con	text, and o	constraint	Indations to programs, agencies, legislative bodies, and service systems, is to develop policy and procedure that support relationship-focused work, ents and to obtain funding and other resources. (Consulting) 5
Leading	People					
37. Mode health. (els persona Motivating 0	al commit 3) 1	tment and	d empathy	in promo	otion of all aspects of the practice of infant and early childhood mental 5
						wn and others' expert knowledge, to promote effective infant and early ams. (Advocacy)
highly ef		ant and e	arly child	dhood me		reporting employees, and clients in a range of skills to help them become h practitioners, positively contributing human beings and culturally
	0	1	2	3	4	5

40. Demonstrates	ability an 1	d support 2	ts others t	o actively 4	listen to others and ask questions for clarification. (<i>Listening</i>) 5
41. Demonstrates	ability an 1	d support 2	ts others t	o commu	nicate clearly, honestly, sensitively, and diplomatically. (Speaking) 5
	moranda, o	contracts,	articles,		ners to write clearly, concisely, and with appropriate style in creating web content, grant applications, instructional and meeting materials,
v	•	2	5	•	
43. Effectively fa 0 Thinking	cilitates sr 1	nall grou 2	ps (eg, int 3	terdiscipli 4	inary or interagency teams). (Group Process) 5
44. Demonstrates understand the "b	ig picture'	when an 2	nalyzing s 3	situations. 4	e and explain the interaction of multiple factors & perspectives to (Analyzing Information) 5
					thers to generate new insights and workable solutions to issues related to colving Problems)
					thers to integrate all available information, consult with others, and (Exercising Sound Judgment) 5
47. Demonstrates 0	ability an 1	d support 2	ts the abil	ity of othe 4	ers to consider difficult situations carefully. (Maintaining Perspective) 5
48. Defines, crea	tes a seque	ence for,	and prior	itizes task 4	is necessary to perform role and achieve goals. (<i>Planning & Organizing</i>) 5
Reflection 49. Regularly export or mentor. (<i>Cont</i>)			ats, feeling	gs, strengt	ths, and growth areas and discusses issues and/or concerns with supervisor
50. Seeks a high o	degree of o	congruen 2	ce betwee	en self-per	reception and the way others perceive him/her. (Self-Awareness) 5
51. Remains and 0	supports o	others to	remain op	oen and cu	rious. (Curiosity) 5
52. Keeps up-to-or health practice. (A)					ant/young child development and infant and early childhood mental 5
53. Uses results o	of reflection	on to iden 2	tify areas	for perso	onal development. (Emotional Response) 5
54. Recognizes an	nd respond	ls approp 2	riately to	parallel p 4	rocess. (Parallel Process) 5
Administration 55. Identifies opp 0	ortunities 1	and need	s for prog	gram impr 4	rovements, expanded services, and new service. (<i>Program Management</i>) 5
56. Partners with improvements. (ve bodies	, and/or service systems to develop new services and/or achieve

0 2 3 5

57. Establishes and monitors process and outcomes measures for continuous quality improvement; feeds information back to agencies. (Program Evaluation)

5 4

58. Assists agencies, programs, legislative bodies, and service systems in obtaining funding, including grant development and preparation. (*Program Funding*) 0 1 2

3 5 4

Comments:

MI-AIMH EARLY CHILDHOOD MENTAL HEALTH ENDORSEMENT (ECMH-E®) PROFESSIONAL REFERENCE RATING FORM TEACHER, SUPERVISOR, CONSULTANT, COLLEAGUE

Your Name:	
Your Address:	
Email address:	
Daytime Telephone (including area co	ode):
Credentials/Discipline/Education:	
Years of Work with infants, young ch	nildren, caregivers, and families:
Current Position:	
You are which in relationship to appli	icant?:
Reflective Supervisor/Consultant	Program Supervisor Teacher Supervisee Colleague
Briefly describe the nature of your wo	ork together or your professional relationship:
	A
Name and Address of agency or organ	nization where mentoring/supervision/consultation/training took place:
You worked with the applicant from ((mo./yr.) to (mo./yr.)
	supervisor/consultant, did you meet (circle all that apply)
Weekly Biweekly Monthly	For a total of hours
Other	
I hereby recommend	_ do not recommend this applicant for MI-AIMH Endorsement®.
ne information I have provided on this	form is correct to the best of my knowledge and belief.
	D. (
gnature:	Date: