**Please note: Renewal Deadline extended to 2020**

**DUE no later than APRIL 30, 2020**

1. **PLEASE EMAIL COMPLETED FORM BY April 30, 2020 to:** [azendorsement@gmail.com](mailto:azendorsement@gmail.com)
2. Renew your membership renewal payment at: [www.itmhca.org/membership.php](http://www.itmhca.org/membership.php)

**Name:** **Date submitted:**

**Indicate your endorsement:**  **IFA** **IFS** **IMHS** **IMHM: C** **P** **F**

**Email address:**

**(Use a personal email address to avoid email from ITMHCA being blocked as spam)**

**Current employer:** **Current position:**

**Languages spoken in addition to English:**

***If you would like your endorsement status posted on the ITMHCA website, go to the "***[***member login***](http://www.itmhca.org/members/)***" page at*** [***www.itmhca.org***](http://www.itmhca.org)

**To maintain your Endorsed status please submit the following:**

1. A minimum of 15 clock hours per year of relationship-based education and training **received and/or provided** pertaining to the promotion of social-emotional development and/or the practice of infant mental health (e.g. local or regional trainings, related course work at colleges or universities, infant mental health conference attendance, publications and other relevant items).
2. **An annual renewal of membership in ITMHCA or another infant mental health association is required. (There are no additional fees for renewal).**
3. ITMHCA strongly recommends that all Endorsed® professionals participate in reflective supervision/consultation (RSC). It is especially recommended that Endorsed professionals who provide RSC also participate in RSC while providing reflective supervision or consultation to others. **IMPORTANT NOTIFICATION:** ITMCHA will require those endorsed as Infant Family Specialist, Infant Mental Health Specialist, and Infant Mental Health Mentor-Clinical to receive a minimum of 12 hours RSC during the year prior to the completion of Endorsement® renewal for the 2023 calendar year. RSC providers must meet Endorsement® criteria. For more information please contact the ITMHCA Endorsement Coordinator at [azendorsement@gmail.com](mailto:azendorsement@gmail.com)
4. Title of training:       Date:

Presenter:       Sponsored by:

Type of training: (book review, course, trainings, online training [max 3 hours]:

Hours Completed:

IMH Competencies addressed:

Description:

1. Title of training:       Date:

Presenter:       Sponsored by:

Type of training: (book review, course, trainings, online training [max 3 hours]:

Hours Completed:

IMH Competencies addressed:

Description:

1. Title of training:       Date:

Presenter:       Sponsored by:

Type of training: (book review, course, trainings, online training [max 3 hours]:

Hours Completed:

IMH Competencies addressed:

Description:

1. Title of training:       Date:

Presenter:       Sponsored by:

Type of training: (book review, course, trainings, online training [max 3 hours]:

Hours Completed:

IMH Competencies addressed:

Description:

1. Title of training:       Date:

Presenter:       Sponsored by:

Type of training: (book review, course, trainings, online training [max 3 hours]:

Hours Completed:

IMH Competencies addressed:

Description:

1. Title of training:       Date:

Presenter:       Sponsored by:

Type of training: (book review, course, trainings, online training [max 3 hours]:

Hours Completed:

IMH Competencies addressed:

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Type of training: (book review, course, trainings, online training [max 3 hours]:

Hours Completed:

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Type of training: (book review, course, trainings, online training [max 3 hours]:

Hours Completed:

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Type of training: (book review, course, trainings, online training [max 3 hours]:

Hours Completed:

IMH Competencies addressed:

Description:

1. Title of training:       Date:

Presenter:       Sponsored by:

Type of training: (book review, course, trainings, online training [max 3 hours]:

Hours Completed:

IMH Competencies addressed:

Description:

**Keep your email address current at** [**www.itmhca.org**](http://www.itmhca.org) **“Member Login”**

**Membership Renewal Fee:**

**Membership in an Infant Mental Health Association is required for Endorsement® Renewal.**

***For 2020-$40.00***

***Preferred method of Payment is available online*-** [www.itmhca.org/membership.php](http://www.itmhca.org/membership.php)

***Look for: “CLICK HERE TO RENEW YOUR ITMHCA MEMBERSHIP”***

***If you do not have your member number, go to “member login” to request it be emailed to you***

Alternate Payment Method:

Send Payment to: The Infant Toddler Mental Health Coalition of Arizona, P.O. Box 2234, Phoenix, AZ 85002-2234