



MISSOURI ASSISTED LIVING ASSOCIATION (MALA)
LIMA TRAIN THE TRAINER WORKSHOP
APPLICATION FORM

Date of Train the Trainer Workshop: _____

Applicant Information - ALL FIELDS MUST BE COMPLETED - please PRINT

Legal Name: _____
(First) (Middle) (Last)

SSN #: _____ Date of Birth: _____ RN/ LPN (circle one) License #: _____

Address: _____ City _____ State _____ Zip _____

Home/Cell Phone: (____) _____ **BEST** E-Mail for you: _____

Employer Information - if applicable

Employer Name: _____

Address: _____ City _____ State _____ Zip _____

Work Phone: _____

I would prefer that my workshop packet from MALA be sent to my work address, not my home mailing address ☐

The following must be submitted to the MALA office with this completed form:

- ☐ Copy of nursing license **or** print Nursys report ☐ Copy of social security card
☐ Payment

Failure to submit any of the above will delay application approval by MALA. Applicants will receive a letter of confirmation from MALA to the applicant's home address. If approved, MALA will provide additional workshop instructions.

I affirm that I meet the requirements in accordance with 19 CSR30-84.030 to attend the Train the Trainer workshop offered by the Missouri Assisted Living Association (MALA).

Signature of Applicant

Date

Advance Payment Required:

Amount Due: \$105.00

No refunds will be given if your registration is canceled five days prior to the workshop. Any cancellations received more than five days prior to the workshop will be charged a \$25 cancellation fee. Cancellations must be received in writing or e-mail.

- ☐ Check payable to MALA
☐ Credit Card ☐ Discover ☐ Visa ☐ MasterCard ☐ American Express

Card Number: _____ Exp Date: _____ 3 Digit Security Code (on back of card): _____

Signature (Required) _____ Zip Code: _____

If paying by credit card, applications may be faxed to (573) 634-7344

Mail all required information to:

Missouri Assisted Living Association
2407B Hyde Park Road
Jefferson City, MO 65109
573-635-8750
info@malarcf.org

For Office Use Only:

MALA: Approved Denied

Date Applicant Notified:

Email Letter