**Parent Learning Lab Application - LEVEL I**

*Please fill out the following information to apply for the next* ***Parent Learning Lab LEVEL I*** *Cohort. Applications* ***must*** *be received at least* ***14 days prior to the start date .***

*After I have received your Application, I will contact you to set up a time to complete your Registration.*

**Date:**

**Name:**

**Address:**

**Phone:**

**EMail:**

**1- How many kids do you have ? (Include ages & gender)**

**2- Do any of your children have any special needs or diagnoses?** **What are they ?**

**3- Do they go to school ? (include grade they are in, any supports or service)**

**4- Who lives in the home ? ( kids, adults)**

**5- What is your marital status ?**

**6- Is there a CoParent who does not live in the home ?**

**7- Are there any other significant caretakers for your kid(s) (include relationship to your kid(s) ?**

**8- Are you employed ?** **What is your work schedule?**

**9- What are your biggest parenting difficulties or struggles right now ?**

**What have you tried to address these difficulties or struggles?**

**10- Are you currently , or have you ever , worked with a Coach, Counselor,Therapist, or**

**taken other parenting programs ? If so, when ?**

**11- Are you familiar with Conscious Parenting ? If yes, How ?**

**12- What do you hope to learn from this program ?**