MI-AIMH ENDORSEMENT (IMH-E®) REFERENCE RATING FORM APPLICANT'S WAIVER CERTIFICATE

Name of MI-AIMH Applicant:				
	Please Print:	(Last)	(First)	
TO THE APPLICANT: You may written about you in accordance wi this certificate.	voluntarily waive th The Federal Fa	your right to ha mily Education	ve access to a specific Professional R Rights and Privacy Act of 1974, by s	eference Form signing and dating
I waive, relinquish and disclaim a ment.	all my rights to ha	ve access to the	Professional Reference Form for MI	-AIMH Endorse-
Applicant's Signature			Date	
PRO	FESSIONAL R	EFERENCE	FANT MENTAL HEALTH RATING FORM FOR H MENTOR – CLINICAL (LEV	EL IV)
To be completed by supervisor/med	ntor/consultant/te	acher/colleagu	e/supervisee (circle).	
Name of individual serving as refer	rence:	CX	\	
the Michigan Association for Infan establish the applicant's eligibility the context of your work with the a if you are familiar with the applican	t Mental Health (! for the MI-AIMH pplicant. It is not nt's knowledge &	MI-AIMH). The Endorsement. I necessary to ha skill based on h	provider/professional applying for er e information that you provide on this Please provide a rating on each of the ve directly observed the applicant pe his/her descriptions, affect, reflections dards for service providers and profes	form will help to items based on rform his/her role s, and changes
For more information about the Enaimh.org/endorsement.	dorsement require	ments and com	petency guidelines, please go to	

CD1		4		
The	rating	sca	e	18

0 – I do not 1 – Minimal 2 – Below A 3 – Average 4 – Above A 5 – Exception	Ability Average A Ability Average A	bility bility	mation to	rate/com	ment				
Theoretical	Foundat	ions							
1. Demonst sion/consult								rly parenthood roles in reflective supervi-	
								dler development and behavior within a fant/Very Young Child Development &	
,	0	1	2	3	4	5			
	r caregive							parent (caregiver) strengths and to follow thers. (Infant/Very Young Child-Family	r
	0	1	2	3	4	5) ′	
								actice criteria delineated in MI-AIMH's ionship-Focused Therapeutic Practice)	
								early developing parent-child relationship & Dynamics)	S
strengths, as	well as r	elationshi	p disturb	ances, dis	orders, a	nd risks ii		ssessments to identify capacities and anod families in reflective supervi-	
								d respect ethnicity, culture, individuality, Competence)	
	very you	ng child a	as well as	developr	nental de	lays, dist	ırbances, and	ks that threaten the emotional well being disorders of infancy in reflective supervi	-
	rengths, re	esources,	culture, a	nd priorit				dividual needs, desires, histories, lifestyles is ultation provided to others. (<i>Psycho-</i>	s,
as appropria	te, using				opment o	of others t		ignose mental illness in family members, ded to others. (Mental & Behavioral Dis-	-
orders in Ad	lults) 0	1	2	3	4	5			
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crease knowledge reg Evaluation – Level IV	_	fant menta	al health,	early dev	elopment and effective intervention strategies. (Research &
0	1	2	3	4	5
Law, Regulation, an	d Policy				
	derstandir	ng of and			e MI-AIMH Code of Ethics in service provision; demonstrates ual values and beliefs in reflective supervision/consultation pro-
0	1	2	3	4	5
	fessional	code of c			nin the letter and spirit of federal and state law, agency policies e supervision/consultation provided to others. (<i>Government</i> ,
0	1	2	3	4	5
Systems Expertise					
	i.e., food,	housing,	baby iten	ns, childca	t of others to identify, obtain and use available resources for are, medical care, and protection in reflective superviews)
Direct Service Skills					م ، ص ، م ، <i>م</i>
	likelihoo	d of future	e crises, s	solving pr	others to promote parental competence in facing challenges, oblems of basic needs and familial conflict in reflective supervi-
young child together	to underst	and the n	ature of t	heir relati	others to observe the parent(s) or caregiver(s) and infant/very onship, developmental strengths, and capacities for change in servation & Listening)
	very you	ng child d	levelopm	ent, in acc	ners to conduct observations, discussions, and formal & informal cordance with established practice in reflective supervi- nent) 5
					tivity to the infant, the parent/caregiver, and the supervi- th. (<i>Responding with Empathy</i>)
					nvironmental and caregiving threats to the health and safety of te action. (Advocacy; Safety) 5
					ers to incorporate what is seen, heard, and discussed with parents ntervention/Treatment Planning) 5
	on behalf <i>e</i>)	of their ve	ery young	g children	of others to offer appropriate developmental guidance to parents in reflective supervision/consultation provided to others. (De -
0	1	2	3	4	5

11. Demonstrates the ability and supports the development of others to incorporate current research & evaluation to in-

						tional support to supervisee/consultee in a manner that strength- ry young children served. (Supportive Counseling)
based therapi	ies & prac	tices to p	arental h	istories of	fattachme	f others to engage in parent-infant/very young child relationship- ent, separation, and unresolved losses as they affect the devel- ent-Infant/Very Young Child Relationship-Based Therapies &
,	0	1	2	3	4	5
	vith famili	es includ	ling observision/Co	rvation of onsultation	feelings	s supervisees/consultees to use the relationship to reflect upon & thoughts and effects of treatment relationships and specific <i>IV</i>)
	U	1	2	3	4	
Working wit	th Others					
						others to work with and respond to families and colleagues in a consultation provided to others. (Supporting Others)
	0	1	2	3	4	5
ents and othe	r caregive	rs on bel	nalf of so	cial and e	motional	by of others to enter into trusting working relationships with par- development of infants/toddlers and families in reflective su- intaining Relationships)
						nt others to collaborate with other professionals and/or commufants, young children and families. (<i>Collaborating</i>)
						s related to effective, culturally sensitive, relationship-based tive supervision/consultation provided to others. (<i>Resolving</i>
,	0	1	2	3	4	5
						others to balance compassion against expectation of change supervision/consultation provided to others. (<i>Empathy & Com-</i>
pussion	0	1	2	3	4	5
						ent of others to work as a partner/team member with program and or to educate the community. (<i>Mentoring</i>) 5
Communica	ting					
31. Demonst			ipports th	e develop	oment of	others to actively listen in reflective supervision/consultation
p 1 1 1 2 2 2 3 6	0	1	2	3	4	5
						lopment of others to establish a capacity to communicate clearly, vision/consultation provided to others. (<i>Speaking</i>) 5

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						re feeling and thinking, using one to fuel or foster the other in alyzing Information) 5
	emma or t					f others to generate multiple hypotheses that might explain a ember in reflective supervision/consultation provided to others.
(Solving 1 rot	0	1	2	3	4	5
						f others to make good judgments, to be firm, fair and clear, as es of infant mental health work. (Exercising Sound Judgment) 5
	e parent a					f others to hold multiple viewpoints, considering simultaneousl in reflective supervision/consultation provided to others. (<i>Main</i>
	0	1	2	3	4	5
Reflection						
37. Regularly flective super						and growth and supports the development of this skill in in re- templation)
	s appropri	ate perso	nal bound	daries wit	th all infa	unts, families, and supervisees/consultees served. (Self-
Awareness)	0	1	2	3	4	5
	d remaini	ng groun	ded in the	e factual		of others to wonder about a baby or relationship or parent, noticered through observation and inquiry in reflective supervi-
	0	1	2	3	4	5
						nue development in the infant/family field and encourages this in ofessional/Personal Development)
·	0	1	2	3	4	5
41. Uses refl supervision/c						response to infant/family work and facilitates this in reflective response)
r	0	1	2	3	4	5
42. Recognize provided to o				ely to par	allel proc	eess and encourages this in reflective supervision/consultation
provided to o	0	1	2	3	4	5
Comments:	/					

MI-AIMH ENDORSEMENT (IMH-E®) PROFESSIONAL REFERENCE RATING FORM TEACHER, SUPERVISOR, CONSULTANT, COLLEAGUE, OR SUPERVISEE

Name of Applicant
Your Name:
Your Address:
Email address:
Daytime Telephone (including area code):
Credentials/ Discipline/Education:
Years of Work with infants, toddlers, caregivers, and families:
Current
Position:
You are which in relationship to applicant: ☐ Supervisor ☐ Teacher ☐ Consultant ☐ Supervisee ☐ Colleague
Briefly describe the nature of your work together or your professional relationship:
Name and Address of agency or organization where mentoring/supervision/consultation/training took place:
You worked with the applicant from (mo./yr.) to (mo./yr.)
If you are/were applicant's reflective supervisor/consultant, did you meet (circle all that apply)
Weekly Biweekly Monthly For a total of hours
Group Individual
I hereby ☐ recommend ☐ do not recommend this applicant for MI-AIMH Endorsement.
The information I have provided on this form is correct to the best of my knowledge and belief.
Signature: Date:
Please return completed form to the applicant in a sealed envelope with your signature over the flap.