Live & in person

IMPROVE YOUR SELF-ESTEEM

April 11 and April 12, 2024
Ralph A. MacMullan Conference Center, 104 Conservation Dr., Roscommon MI
8:30 a.m. – 4:30 p.m.

Improving your self-esteem is a 2-day in-depth training that will help Peer workers see themselves differently and feel better about themselves. This will include taking time to drill down to a better understanding of where your lowest self-esteem comes from and being given the needed tools to improve your self-esteem from the inside out. Letting go of past hurts, limiting beliefs, and learning to forgive yourself are just some of the new strategies you'll walk away with. Participants will:

- Learn three different distinctions in what people label as "self-esteem.".
- Hear new ways of processing negative emotions so you can feel better about yourself.
- See how your improved self-esteem can help you set and reach your goals.
- Discover ways to evaluate where low self-esteem is coming from.
- Determine what "unresourceful programs" have been keeping you stuck.
- Look at practical ways to improve your self-esteem and keep it high.
- Listen to strategies that will lead to resilience in recovery.

Chuck Hendrix is a Certified Peer Support Specialist, Certified Life Coach, and NLP Practitioner, and a Board- Certified Hypnotherapist. He has been studying personal growth for more than 25 years. He is always developing special trainings to further the impact that CPSS and Recovery Coaches can make with those they work with. Chuck is known for his unique communication style that is both engaging and funny. You won't want to miss this training.

13 CEs

$50

The Michigan Department of Health and Human Services has provided funding for this Initiative through Federal Community Health Block Grants

Improve Your Self-Esteem

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$50

Name: _____

Address: _____

City, State, Zip: _____

Cell Phone: _____ Work Phone: _____

Email: _____

☐ **Certified Peer Support Specialist** ☐ **Certified Peer Recovery Coach**

Agency Name: _____

Agency Address: _____

City, State, Zip: _____ Phone: _____

Emergency Contact Information:

Name: _____ Phone: _____

Food and other Accommodations: _____

Clearly State your specific needs for dietary restrictions, mobility assistance, interpreters, etc. Arrangements for special needs will be honored for those written requests received 10 business days prior to the training. All attempts for on-site requests will be made.

Cancellation Policy: Registrations may be transferred to another employee of the same firm upon written request to Recovery@mymdrc.org. Cancellations must be received in writing to us within 10 business days prior to the date of the training. For questions, email Recovery@mymdrc.org.