Counselor Profile and Training Log	Date of Submission:					
Enter BIP Agency Name		Enter Individual Counselor Name				
REQUIREMENT	TRAINING TITLE	DATE	TRAINING PROVIDER & WHERE COMPLETED	TRAINER SHELTER- BASED OR SHELTER- APPROVED (Y/N)	TRAINING CERTIF. ATTACHED (Y/N)	
Basic CORE Training 40 hours of basic core train core curriculum shall include the following component		instruction shall	be provided by a shelter-based	l or shelter-appro	ved trainer. The	
A minimum of 8 hours in basic DV knowledge focusing on victim safety and the role of DV shelters in a community-coordinated response.						
A minimum of 8 hours in multicultural, cross-cultural, and multiethnic diversity and DV.						
A minimum of 4 hours in substance abuse and DV.						
A minimum of 4 hours in intake and assessment, including the history of violence and the nature of threats and substance abuse.						
A minimum of 8 hours in group content areas focusing on gender roles and socialization, the nature of violence, the dynamics of power and control, and the effects of abuse on children and others as required by PC Section 1203.097.						
A minimum of 4 hours in group facilitation.						
A minimum of 4hours in DV and the law, ethics, all requirements specified by the probation department pursuant to PC Section 1203.097, and the role of BIPs in a coordinated-community response.						

Enter BIP Agency Name	Enter Individual Counselor Name								
REQUIREMENT	BIP PROGRAM		# OF WEEKS OR # OF HOURS	ATTENDED A MINIMUM OF A 2-HR GROUP EACH WEEK (Y/N)					
BIP Facilitator Training A person who works as a facilitator in a batterers' intervention program that provides programs for batterers pursuant to subdivision (c) of PC Section 1203.097 shall complete the following requirements before being eligible to work as a facilitator in a batterers' intervention program:									
Fifty-two weeks or no less than 104 hours in six months, as a trainee in an approved batterers' intervention program with a minimum of a two-hour group each week.									
REQUIREMENT	APPLICABLE? (Y/N)	NAME OF FACILITATOR	NAME OF TRAINER	DATE(S) OF GROUP SESSION(S) (FROM/TO)					
The aforementioned training program shall include at least one of the following: (indicate any/all that apply)									
Co-facilitation internship in which an experienced facilitator was present in the room during the group session.									
Observation by a trainer of the trainee conducting a group session via a one-way mirror.									
Observation by a trainer of the trainee conducting a group session via a video or audio recording.									
Consultation or supervision twice a week in a six-month program or once a week in a 52-week program.									

Attach copies of all pertinent documentation (such as diplomas, etc.) and provide enough information to make it possible for the Probation Department to perform an independent verification of the facts presented.