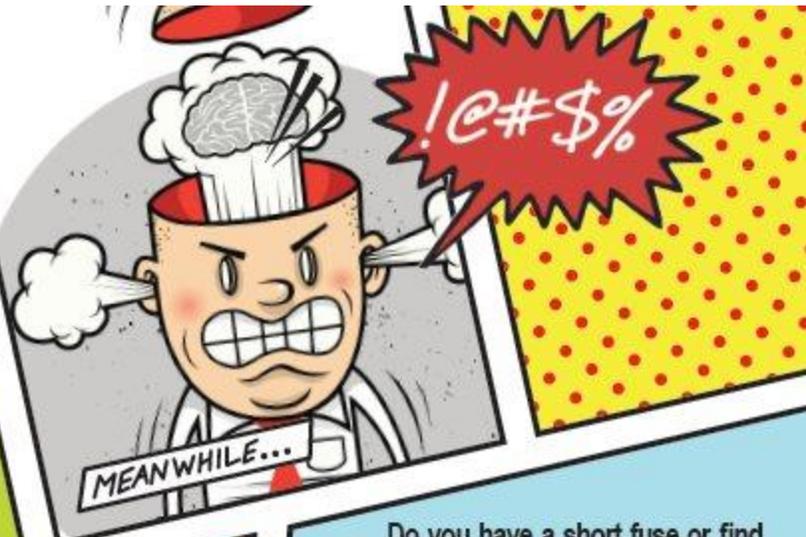


Do You Have a Short Fuse?

PRESENTER:
ROBERT GOLDSBERRY
3 CEU CREDITS



STRESS & ANGER MANAGEMENT

Do you have a short fuse or find yourself getting into frequent arguments and fights? Anger is a normal, healthy emotion, but when chronic, explosive anger spirals out of control, it can have serious consequences for your relationships, your health, and your state of mind. This *basic* workshop is based on "The Cycle of Anger" and will discuss triggers, negative thoughts, emotional and physical responses, and resulting behaviors and tools to help manage your stress and anger.



WHAT?!

The Basics

APRIL 2

8:30 - 12:00



ODMHAS TRAINING INSTITUTE
SHEPHERD MALL
2ND FLOOR NORTH END
2401 N.W. 23RD STREET, SUITE 1F
OKLAHOMA CITY, OK 73107-2431
(405) 522-8300

Class Description:

Do you have a short fuse or find yourself getting into frequent arguments and fights? Anger is a normal, healthy emotion, but when chronic, explosive anger spirals out of control, it can have serious consequences for your relationships, your health, and your state of mind. This workshop is based on "The Cycle of Anger" and will discuss triggers, negative thoughts, emotional and physical responses, and resulting behaviors and tools to help manage your stress and anger.

Presenter

Robert (Bob) Goldsberry brings thirty years of experience to ODMHSAS Human Resource Development as a Training Specialist. Bob has worked as an educator and trainer during his career. He is a certified AHA instructor trainer in CPR and First Aid and a certified Therapeutic Options trainer. Bob earned his M.Ed. in Educational Technology from the University of Oklahoma. Bob is a member of the American Society for Training and Development (ASTD).

Date:

April 2, 2014-8:30 am

Training Fees

Current ODMHSAS employees are admitted at no charge. The registration for non-ODMHSAS participants is \$45. *Payment may be made by check, credit card or money order only. No cash please. **There are no refunds.***

Continuing Education Credits

The ODMHSAS Institute for Mental Health and Substance Abuse Education and Training has approved **three (3.00) credit hours** through the Oklahoma State Board of Licensed Social Workers, the Licensed Marital and Family Therapist committee, Licensed Alcohol and Drug Counselors, the Licensed Professional Counselors committee, and Oklahoma State Board of Examiners of Psychologists. Participant evaluation forms must be submitted in order to receive continuing education credit and a certificate of attendance.

Special Accommodations

Sign interpreters and/or other special accommodations required by disabled participants will be available upon advance request (please allow one week's notice). Please indicate on the registration form the type of special accommodations, if any, you require. For requests, call 405-522-8300.

Please note that only the first 20 registrations will be accepted. If you are registered you will receive a confirmation email once registration closes. Please provide a valid email address on your registration form.

No on-site registrations will be accepted.

REGISTRATION FORM

Oklahoma Department of Mental Health and Substance Abuse Services
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**Stress and Anger Management
Facilitator: Robert Goldsberry**

HOW TO REGISTER

By Mail:

ODMHSAS, Human Resources Development
2401 NW 23rd Street, Suite 1F
Oklahoma City, OK 73107

By Fax: Faxed registrations are accepted at **405-522-8320**

REGISTRATION INFORMATION:

Name: _____

Home Phone Number: _____

Occupation or Job Title: _____

Place of Employment: _____

Address: _____

City, State, ZIP: _____

Daytime Phone: _____

E-Mail Address: _____

****Note:** If an e-mail address is included, a confirmation that your registration has been received will be e-mailed to you.

I require special accommodations as follows: _____

Oklahoma City

April 2, 2014-8:30 am

PAYMENT

Please enclose registration payment. If paying by purchase order (PO), please mail or fax a copy of the purchase order with the name of the attendee(s) included on the PO. If paying by check or money order please make payable to ODMHSAS. Please check all boxes that apply. No Refunds.

FORM OF PAYMENT

Check or Money Order \$45

Purchase Order # _____ \$45

Credit Card (circle one): \$45

Visa MasterCard

Credit card # _____ Expiration Date: _____ Cardholder signature: _____

For information, call Human Resources Development at 405-522-8300.

