Finding Your Developmental Edge: Achieving Excellence

Dates
November 8-10, 2018
Begins Thursday, 10am
Ends Saturday, 4pm

Fee
$1,395
GISC Members: $1,345

CE hours
22 - ICF

Faculty
Michael Shipman, MSc, MHCS, and Marianne Roy

Using GISC’s signature strengths-based approach, this workshop offers an intensive and focused opportunity for participants to explore core competencies and surface their developmental edge. Participants will leave the workshop with an effective learning agenda that leverages core competencies to expand and broaden development, choice, and impact.

A unique and structured method will be used to explore how some aspects of your core competencies can be obstacles to success when overused. The result will be a clear sense of the connection between who you are and what you do.

You will use this newfound understanding to construct a learning plan that will feel intrinsically satisfying and will fit your learning style as well as the realities of your life and work. You will leave with a plan of action that provides detailed guidance on what new things to try each day.

This is a highly interactive and dynamic workshop, where the old adage is true—the more you give, the more you get.

Benefits
Participants will:
• Obtain greater clarity in defining core competencies
• Surface blind spots and assumptions through peer and faculty feedback
• Gain insight into how core competencies may contribute to difficulties experienced in their work
• Achieve greater confidence through understanding why certain people and situations are uniquely challenging to them
• Create a well-grounded and action-oriented development plan that provides detailed guidance

Participants
This workshop is open to consultants, coaches, clinicians, leaders, managers, and other professionals.

ICF has certified this course for 22 core competency hours.

“I was looking for CE credits and wanted to take something different, not just another webinar. This program gave me a new way of thinking about my strengths rather than focusing on weaknesses and took me to an edge that I never would've chosen myself. It really works. I have often taken courses that are deep, yet none that were delivered with such grace, gentleness and safety. The experience was life changing.”

Linda Schnabel, PCC
CareerWorks
Registration Form

Name: _____________________________________________________________________________     Male: [ ]  Female: [ ]

Company Name: _____________________________________ Position: ________________________

Preferred Mailing Address - Work [ ] / Home [ ]: __________________________________________

City/State/Province/Postal Code/Country: ___________________________________________________

Work Phone: ____________________    Home Phone: ____________________

Mobile Phone: ____________________    Email: ________________________

Current Profession (please check all that apply):
Coach [ ]  Consultant/OD [ ]  Psychotherapist [ ]  Leader/Executive [ ]  Nonprofit [ ]  Educator [ ]  Other [ ]

Professional Affiliations/Associations:
ICF (Int’l Coach Federation) [ ]  OD Network [ ]  APA [ ]  Other (please specify) [ ]

How did you hear about this program? ______________________________________________________

If by referral, from whom? ________________________________________________________________

Please register me for:
Program Title _________________________ Date _________________________ Fee _________________________

____________________________________________________________________________________

____________________________________________________________________________________

I am a GISC Member: [ ]  I would like to join GISC: [ ] $125/year

Total: _________________________

Invoice my organization: [ ]

____________________________________________________________________________________

____________________________________________________________________________________

I have enclosed a check or money order payable to GISC (US funds only): [ ]

Charge my:   Visa [ ]  Mastercard [ ]  American Express [ ]

Name as it appears on card: ____________________________

Account Number: ____________________________ Expiration Date: ____________

Signature: ________________________________

Cancellation Policy: Refunds are available up to 21 days prior to a program, less a $35 administration fee. When cancellation is made with a notice of 20 days or less, tuition will not be refunded, but may be applied to a future program within the next calendar year.

Mail or fax along with your payment to:
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www.gisc.org   p: 508.349.7900   f: 508.349.7908   e: office@gisc.org