

Independent Facilitator Biography Form

1. Name: Lisa Brink

2. Phone Number(s)

a. Work: (269) 345-1516, extension 111

3. Email Address: brinkl@dnswm.org

4. Organizational Membership or Affiliations:

Disability Network Southwest Michigan



5. Specific areas of expertise: I am a former Options Counselor that specialized in long term community supports and services. I currently work with people with disabilities (any type including mental health and developmental) and the elderly population. I have a vast knowledge of home and community based services including various community resources.

6. What unique attributes do you bring to your role as an independent facilitator?

Organized, positive, trustworthy, understanding, flexible, genuine, thoughtful

7. Why do you want to serve as an Independent Facilitator?

I want to be able to facilitate the process in a comfortable atmosphere where the person's voice is at the center, all while being an ally for the person.

8. Accommodations

a. Are you fluent in languages other than English? No

b. Please identify other available accommodations. None

c. Do you need any accommodations to facilitate your role as a Facilitator? No

9. Times of day and geographic locations for which you are available to facilitate:

Business hours are preferred but evening hours Monday through Thursday may be available with enough notice. I am willing to travel to the following 8 counties: Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, St. Joseph, and Van Buren.

Level of Competency: III (Fully Certified)

Level 3: Independent Facilitator is fully certified to operate as an Independent Facilitator. At this level of skill, the individual has completed the training offered by the Michigan Developmental Disabilities Institute at Wayne State University and been observed and evaluated as an Independent Facilitator.