

Independent Facilitator Biography Form

1. **Name:** Heather Heffernan

2. **Phone Number:**

a. Cell: (313) 414-1097

3. **Email Address:** heffernanh@live.com

4. **Organizational Affiliations:** Statewide Autism Resources and Services (START), Special Olympics

5. **Specific areas of Expertise:** Educational planning, transition services, person-centered planning, self-determination, community engagement, communication

6. **What unique attributes do you bring to your role as an Independent Facilitator?**

I am a passionate mother of 6 children. I have a Masters in clinical psychology and Educational Specialist degree in Educational Leadership. I have worked with people of all ages who have a variety of disabilities, and believe that everyone deserves to reach their greatest potential.

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

To support and engage others within their communities and help them to reach their greatest potential.

8. **Accommodations**

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

b. Do you require any accommodations? No

9. **What times and geographic areas are you available to facilitate?**

Livingston, Washtenaw, Western Oakland, southeastern Ingham, southern Genesee. Evenings during Sept-June, all times during June-Sept.



**Michigan Developmental Disabilities Institute, Wayne State University
Independent Facilitator Level of Competency: I (Trained)**

Level 1: Independent Facilitator has completed the Independent Facilitator training provided by the Michigan Developmental Disabilities Institute, Wayne State University.