



**PHOENIX TRAINING GROUP**  
**VIP Response® Training**  
**SKILL COMPETENCY ASSESSMENT**

PRINT NAME: _____		TITLE/POSITION: _____	
INSTRUCTOR: _____		CONTACT HOURS: _____	TIME: _____
INITIAL CERTIFICATION: ( )		FACILITY YOU ARE FROM: _____	
RE-CERTIFICATION: ( )		DATE: / /	
<b>DESCRIPTIONS OF SKILLS EVALUATED</b>		<b>COMPLETE</b>	<b>INCOMPLETE</b>
GENERAL SAFETY GUIDELINES FOR INDIVIDUALS & FACILITIES			
VERBAL TECHNIQUES TO DE-ESCALATE INDIVIDUALS			
IMPORTANCE OF TEAMWORK, COMMUNICATION & A COORDINATED PLAN			
EXAMINING THE ELEMENTS OF THE ASSAULT CYCLE			
IMPORTANCE OF INITIATING LEAST RESTRICTIVE MEASURES			
TECHNIQUES TO AVOID PHYSICAL ASSAULT TO YOU & OTHERS			
EVASIVE & ESCAPE MANEUVERS FROM ASSAULTIVE INDIVIDUALS			
SAFE EVASION TECHNIQUES WHEN FACED WITH VIOLENT BEHAVIOR			
DEMONSTRATES & VERBALIZES UNDERSTANDING OF TRAINING			
MEETS STANDARDS OF TRAINING COMPETENCY			
NEEDS ADDITIONAL INSTRUCTION			

Initial here ***only*** if you are declining to participate physically in the course.  
**Due to physical limitations, I am declining to participate in the Hands-On portion of this class. In relation to this limitation, I still understand that I must be present and observe the class and demonstrate my understanding to the instructor in order to receive credit.**

By signing this document, I am indicating that all of the components listed on this form were covered during the class and that I have had the opportunity to ask questions and have had been given an ample amount of opportunities to ask for help and practice the techniques offered within the course. I testify that I am knowledgeable to apply the concepts and perform the techniques listed on this document as a result of this training. I understand that any additional training and resources will be available and provided upon request in the areas requiring assistance.

And in recognition that, as a part of such program, I will be trained in and hereby consent to training in the intervention techniques with regard to physically disruptive clients and individuals and in further recognition of my desire to acquire proficiency in the techniques and philosophies described in this program, I hereby knowingly, freely and voluntarily waive any and all claims, demands, damages, actions or causes of action against Phoenix Training Group or any agent, or educator involved thereof which may arise on account of loss or injury which may be sustained by me through or by reason of my participation in the program. I certify that it has been explained to me and I understand that activities to be conducted in connection with Phoenix Training Group are of a physical nature, including, but not limited to, escape techniques and methods of physical restraint, and I expressly include such physical activities within the terms of this release.

I hereby expressly grant to Phoenix Training Group and all of its employees, agents, and assigns, the right to photograph me and use my picture, silhouette and other reproductions of my physical likeness, including sound recordings (as the same may appear in any still camera photograph, motion picture film, video and/or any type of digital data capturing, whether transferred or stored) in and in connection with the exhibition, theatrically, on television, on the Internet, over Internet devices, in print, or within any sort of publicized format, of any motion pictures in which the same may be used or incorporated, and also in the advertising, exploiting and/or publicizing of any such motion picture or video, but not limited to television, theatrical motion pictures, still pictures, ads, print, video and/or any type of digital data capturing, including webinars, remote or virtual classes and recordings, whether transferred or stored.

If any dispute with Phoenix Training Group regarding this release and waiver and liability, my rights under it, and claim of negligence against Phoenix Training Group as a result of its training or educational procedures, or any similar or related matters. I agree that any such dispute shall be submitted to Binding Arbitration under the commercial Arbitration Rules of the American Arbitration Association in Los Angeles, California, with each side bearing its own costs and attorney's fees. The award of the arbitrator may then be entered as judgment in any court having jurisdiction over the matter. I also agree that any and all comments stated within the course evaluation, may be used in any marketing and/or website material, printed or electronic, in its entirety or in part, as Phoenix Training Group sees fit.

I declare under penalty of perjury under the laws of California, as well as each State within the U.S., that I have fully read and understand the contents of this document, that I am aware that it is a complete release of liability and that I am executing this document of my own free will.

EMPLOYEE/PARTICIPANT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

INSTRUCTOR SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

INSTRUCTOR COMMENTS: \_\_\_\_\_