

Understanding Suicidology

Institute for Research & Practice — Education Services

Education Services Intake Form

1) Organization & Contact

Organization name

Department/Unit

Website

Primary contact (name & title)

Email

Phone

2) Education Service Requested (check all that apply)

Core Foundations — Formulating Individualized Suicide-Risk

Core Foundations — Subacute-Acute Processes

Core Foundations — Acute Mental States

Populations — Youth Suicide Risk Formulation

Populations — Suicide-Risk Across the Lifespan

Populations — Suicide-Risk in Schools

Populations — Cultural Considerations

Operational — First Responders

Operational — Police: Community Risk

Operational — Suicide by Cop Considerations

Advanced — Murder-Suicide: Profiles & Risk Markers

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Keynotes (Narrative; ENSI; Identity; Theory & History)
Custom topic / notes

3) Audience & Logistics

Primary audience — Clinicians

Primary audience — Nurses

Primary audience — Physicians

Primary audience — Educators

Primary audience — Students/Trainees

Primary audience — First Responders

Primary audience — Leaders/Administrators

Primary audience — Mixed/Interprofessional

Expected number of attendees

Learner level

Beginner

Intermediate

Advanced

Preferred delivery format (Online/In-person/Hybrid/On-demand)

Location (if in-person) / Platform (if online)

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Date options (list 2–3)

Session length & schedule (e.g., 2h, half-day, multi-session)

CE/CPD credits required?

Yes

No

Accrediting body / requirements

Learning objectives (your priorities)

Accessibility & accommodations

Recording allowed?

Yes

No

Materials use

Slide-view only

Handouts permitted

4) Budget & Billing

Budget — < \$1,000

Budget — \$1,000–\$3,000

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Budget — \$3,000-\$5,000

Budget — > \$5,000

Budget — TBD

Funding source / PO # (if applicable)

Billing contact name

Billing email

Billing phone

Invoicing address

Payment method — E-transfer (matiasg@live.ca)

Payment method — ACH/Wire

Payment method — Credit card

Payment method — Cheque

5) Additional Notes / Questions

Add details or questions

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Acknowledgement & Signature

By submitting this form, you acknowledge receipt of our scheduling, cancellation, and materials-use policies. Final scope, fees, and dates will be confirmed in a written proposal or service agreement. If your organization requires specific accessibility, privacy, or data-retention standards, please include them above.

Name & Signature

Date