



Mohs Tech Trainer Application

Name _____ DOB _____

Street Address _____

City _____ State _____ Zip _____

Phone (Work) _____ Phone (Home) _____

Fax _____ E-mail _____

Employer's Name _____

Clinic or Institution Name _____

Street Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Years with your current employer: _____ years

Years of experience as a Mohs Tech: _____ years

Have you ever trained other Mohs Techs? _____ Yes _____ No
If yes, number trained _____

Signature _____ Date _____

Employer's signature* _____ Date _____

Mohs Surgeon please complete:

My 20% portion of the training fee should be transferred to my tech. Yes No

**Note: Mohs Techs who are applying to be a trainer must obtain permission from their Mohs surgeons prior to applying.*

Please send form to:
ASMH
555 East Wells Street, Suite 1100
Milwaukee, WI 53202

Phone: (414) 347-1103
Fax: (414) 276-2146
E-mail: ASMH@mohscollege.org



Mohs Tech Quality Assurance (MTQA) Training Initiative

Purpose

The Mohs Tech Quality Assurance (MTQA) Training initiative is designed to provide slide-preparation training to Mohs techs whose employers recommend and approve such training. The training is only open to techs that currently work for an ACMS surgeon. This training is designed for troubleshooting and is not a beginner training for technicians.

Description of Program

Mohs College members may make arrangements to have personalized training for their Mohs tech(s). The Mohs surgeon or tech must contact the ASMH Executive Office and complete an enrollment form. Training can occur at either the trainer or trainee's work place. The surgeon or tech will be given the contact information for the requested trainer. It is the responsibility of the trainee or surgeon seeking training to contact a Mohs Tech Trainer and set up the arrangements for training. An MTQA Training Initiative Registration Form must then be completed and sent to ASMH along with payment. The standard tuition for training will be \$500 for ASMH members and \$750 for non-members. The training will be two days. Upon completion of training, the trainee and trainer will be required to fill out an evaluation form to provide feedback regarding the training experience. After the evaluation form is received, the trainee will receive a certificate of participation. The trainee's practice is responsible for all costs incurred (travel, food, lodging, etc. for the trainee or trainer depending on who has traveled) during training.

Application for Trainer Designations (How to apply to be a Trainer)

Mohs techs who are applying to be a trainer must obtain permission from their Mohs surgeon prior to applying. Applicants who are considered for trainer positions will be asked to submit slides from specific dates established by the Mohs Tech Quality Assurance Committee. Slides will be reviewed and rated by designated Mohs' Surgeons at the ASMH Annual Meeting.

Applicants will be notified by mail if their application and slide review have been found acceptable or not to perform as a trainer.

For more information:

Please contact the ASMH Executive Office at (414) 347-1103 or ASMH@mohscollege.org.