



Certified Peer Specialist Training Application

March 1-5, 2010 *Austin, Texas*

About This Training

Thank you for your interest in serving mental health consumers in the state of Texas! Via Hope Certified Peer Specialist training and certification prepares people living with mental illnesses to use their own experiences of personal growth and recovery to work with peers from a variety of populations and settings. The curriculum focuses on supporting the recovery and wellness of others through peer-delivered services and recovery principles.

All completed applications must be received by Via Hope on or before

February 7, 2010.

Please *mail* or *fax* your completed application to:

Via Hope
c/o Mental Health America of Texas
1210 San Antonio Street, Suite 200
Austin, Texas 78701

Fax: 512-454-3725

*We cannot accept emailed applications.

**Applicants will be notified of their status by February 15, 2010.

Dates and Times:

- March 1-5, 2010
- Training begins at Monday at 8:30 a.m. and ends Friday approximately 5:00 p.m.

Location of Training:

- Location – Austin

Registration Fees and Expenses:

- Class tuition, hotel accommodations are paid by Via Hope
- Travel expenses are class participant responsibility

Candidates selected to participate in this training will be responsible for paying for their own travel to and from the training in Austin, Texas. Training tuition, materials, and hotel accommodation fees will be paid by Via Hope. Continental breakfast and beverage and snack breaks will be provided each day of the training.

Eligible Candidates:

Those who currently working as a peer specialist, whether paid or volunteer, full time or part time are especially encouraged to apply.

- Individuals age 18 or older with personal experience as consumers of mental health services who have a desire to use their experiences to help others.
- Individuals willing to publicly identify as a person living with a mental illness in order to model the reality of recovery.
- Participants have graduated High School or have a GED.
- Via Hope actively seeks a diverse group of training applicants with respect to race, gender, age, sexual orientation, diagnosis and disability.

Candidate Requirements:

- This application must be completed by hand in its entirety.
- Class participants will attend and actively participate in five full days of training. Participants will participate in discussion and role-plays utilizing personal experiences as mental health consumers rather than clinical roles or training.
- Graduates will complete a written certification examination within four weeks of training completion.

Class Participant Selection Process:

Enrollment is limited by class size.

- Participants will be selected using a priority system that favors those applicants currently employed or volunteering in a peer position, followed by those seeking such positions.
- Those currently employed or volunteering and those actively seeking employment as a peer provider are strongly encouraged to apply.
- Completing this application does not guarantee acceptance to the training.

Optional Demographic Information – (Optional information to ensure diversity in the training environment)

Gender

Male

Female

Age

18-25

26-39

40-55

56+

Physical Disability

Yes

No

Ethnicity

Asian/Pacific Islander

American Indian

Black

White

Other

Via Hope Texas

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March 1-5, 2010 Austin, Texas

CPS Application

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Austin, Texas 78701

Fax: 512-454-3725

Phone: 512-454-3706

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***Application submission does not guarantee acceptance into training.

Please answer the following questions to the best of your ability. Handwrite your answers to this application and be sure your answers are readable. We cannot accept typed applications. Answer all questions on the sheets provided. This is not a test, and there is no right or wrong answer. Please be sure to answer all questions and sign your application.

Contact Information

Application Date _____ Primary Phone Number _____

Full Name _____

Home Address _____ City _____

State/Zip _____ Email Address _____

Home Phone _____ Cell Phone _____ Work Phone _____

Reasonable Accommodations Needed? Yes No If yes, please describe _____

Recovery Experience

1. Do you currently hold a position at which you will use the skills learned through this peer specialist training? Yes No

If you are, do you receive pay for this position? Yes No

Position title/location _____

Tasks include _____

2. Are you currently a candidate for a position requiring the skills gained through PS training?

Yes No

If you are, will you receive pay for this position? Yes No

Position title/location _____

Tasks include _____

3. What personal qualities do you feel you possess that make you effective in working with other consumers in the mental health field?

4. What factors were/are important and helpful in your own recovery? _____

5. What specific experience have you had in assisting mental health consumers (i.e. leading support groups, self-advocacy, program involvement, public testimony, etc)? _____

6. What will be the most challenging factor for you in attending this training? How will you prepare for this challenge?

Checklist and Signature

Please initial all that apply to you.

Candidate Eligibility Checklist

- _____ I am 18 years or older.
- _____ I have a High School Diploma or GED
- _____ I myself completed this application.
- _____ I identify myself as a person who has direct personal experience living with mental illness and recovery.
- _____ I do not have a primary diagnosis of Substance Abuse.
- _____ I am able to manage my own wellness.
- _____ I agree to disclose that I have been diagnosed with a mental illness for the purpose of educating, role modeling and providing hope to others about the reality of recovery.

Participation Requirements Checklist

- _____ I will attend and actively participate in the full five days of training and will not miss more than 4 hours of the training for any reason. I will participate in discussion and role-plays utilizing my personal experiences as a mental health consumer.
- _____ I agree to take the certification exam given one to three weeks following training.
- _____ I understand that I am not guaranteed employment or a volunteer position as a result of participating in this training.

Please sign below if you have read and understand what is expected of all applicants, and to verify that all information on this application is correct. Your application will be returned to you if not signed and filled out completely.

Your Signature _____

Print Your Name _____

Candidates will be notified of acceptance into the class by February 15, 2010