

Thank you for your interest in becoming a Peer to Peer Mentor and/or a Certified Peer Support Specialist. The P2P course provides hope and guidance to many people living with mental illness. We appreciate your desire to be a leader for the program.

Date: _____

Name: _____

Address: _____

City/state/zip: _____

Email: _____

Phone Number: _____

Please share your availability:

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Morning	<input type="checkbox"/>						
Afternoon	<input type="checkbox"/>						
Evening	<input type="checkbox"/>						

Do you have your own transportation? Yes No Public Transportation? Yes No

What language(s) do you speak fluently? _____

Why do you want to be a Peer-to-Peer Mentor? _____

What does recovery mean to you? _____

Please define what HOPE is to you: _____

Date you completed the Peer to Peer course as a student: _____

Your initials constitute an agreement with the following statements.

Agreement/disagreement with the following may affect your acceptance into a NAMI Program Training.

_____ (initial) I agree to be interviewed by NAMI Southern Arizona before acceptance into the Peer to Peer Mentor Training Program (screening question will touch on the job description and issues such as acceptance and recovery).

_____ (initial) I agree to become a member of NAMI if accepted into the Peer to Peer Mentor Training Program (if not already a member). Membership dues are as low as \$ 3/ year (qualifying low income)

_____ (initial) I agree to provide a copy of my GED and or High school diploma along with two references by the time I complete the PSS certification.

Information needed should you be selected to attend training:

Do you have any special dietary or physical accommodations we should be aware of? Please specify:

I understand that not all applicants will be accepted for the NAMI Peer to Peer Mentor Training. I understand that my attendance at the Peer to Peer Mentor Training does not guarantee that I will be certified as a NAMI Peer to Peer Mentor or Peer Support Specialist. I acknowledge that if I receive mentor certification, I am making a commitment to facilitate and teach two Peer to Peer 10 class courses.

Sign: _____

Filling out and submitting this application does not guarantee that you will be selected to take the trainings.

****Along with the application, please include a typed, double spaced, one page essay answering the following question: Why do you want to be a Peer Support Specialist?**

Please send your application to:

NAMI Southern Arizona

Attn: Yazmin Garcia

6122 E. 22nd Street

Tucson, AZ 85711

Or email: ygarcia@namisa.org