

MONTANA'S PEER NETWORK 40 HOUR PEER SUPPORT 101 TRAINING APPLICATION

APPLICANT INFORMATION

INSTRUCTIONS: Please type your answers into the boxes below do not hand write your answers. The boxes will expand automatically as you type. Complete the application and the readiness assessment.

Name:

	Email:	Phone:
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Current address:

City:	State:	ZIP Code:
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DEMOGRAPHIC INFORMATION

(THIS INFORMATION IS USED FOR DATA COLLECTION PURPOSES ONLY
THIS HELPS US TO BETTER UNDERSTAND WHO IS APPLYING FOR TRAINING. COMPLETION OF THE FOLLOWING IS VOLUNTARY)

Ethnicity: White Native American African American Hispanic Asian Pacific Islander Other _____

Sex: male female	Date of Birth:	Are you a veteran? YES NO
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Are you currently employed? YES NO	Do you have stable housing? YES NO	
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Do you currently hold a position as a peer supporter? YES NO	If NO, do you plan to apply for a position as a peer supporter after training? YES NO	
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If YES, who is your employer?

If YES, how long have you been employed as a peer supporter?	
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What is your rate of pay?	How many hours per week do you work?	
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What is your title?

Have you ever attended any other peer support related trainings? If so, give some examples

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Why do you want to attend MPN's Peer Support 101 Training?

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What are your areas of strength as a peer supporter?

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What areas do you feel are your weakest as a peer supporter?

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What are areas of peer support are you most interested in learning about?

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Have you completed the Readiness self-assessment?

If no, please complete the readiness self-assessment on the next page.

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MONTANA'S PEER NETWORK 40 HOUR PEER SUPPORT 101 TRAINING APPLICATION

This self-assessment was developed by the Montana Peer Support Task Force as a readiness tool designed to help you determine if you are ready to become a peer supporter. There are no right or wrong answers; it is simply an assessment. Acceptance to the training is not contingent on your answers. Examine each question and answer YES or NO.

YES or NO

1. Are you willing to disclose to your peers, clients, staff and the general public that you have been diagnosed with a mental illness, addiction disorder or both?
2. Can you describe in detail the type of supports you have found helpful to move from where you were to where you are now in recovery?
3. Can you describe what you have had to overcome to get where you are today?
4. Can you describe what you have learned about yourself in recovery?
5. Can you describe some of the things that you do daily to keep yourself on the path of recovery?
6. Can you describe what having a diagnosis means, how it impacted your life?
7. Can you describe some of the strengths you have developed for your recovery?
8. Can you describe the role that a sense of hope played in your life?
9. Could you describe some of the community supports you currently use or have used in the past?
10. Have you ever led a support group?
11. Do you have any experience with advocacy organizations in Montana?
12. Do you have any experience volunteering in a recovery program or serving on related boards or committees?

Total number of YES answers.

If you answered YES to **9 to 12** questions this indicates you are more than likely ready to pursue work as a peer supporter.

If you answered YES to **6 to 8** questions you may need to continue to work on some of the key components to peer support and continue to grow in your own journey of recovery. You may choose to pursue this type of work but may need to strengthen some areas of knowledge and experience.

If you scored **0 to 5** you may not be ready just yet to pursue work as a peer supporter. If this is the case, we encourage you to continue to work on your own recovery. Being grounded in your own recovery is the best step you can take to help others become grounded in theirs.

MONTANA'S PEER NETWORK 40 HOUR PEER SUPPORT 101 TRAINING APPLICATION

This is a comprehensive 40 hour training course intended to provide basic education and instruction around the most important elements of peer support work. This course meets the National Practice Guidelines for Peer Supporters. The course is based on a point system for attendance, participation, completion of assignments, demonstration of comprehension and passing the final exam. You must attain 80% of the points to pass this course. It will be up to you to apply yourself to the course, attend all 40 hours, complete all assignments and pass the final exam. The fee associated with the course is non-refundable once the course has begun and is not based upon a passing score. You may reapply including another fee and retake the course if you do not complete the course or fail to receive enough points to pass the course Upon successful completion Montana's Peer Network will provide you with a certificate of completion.

Are you able to attend all 40 hours required for this training? YES NO	Do you understand there is a non- refundable \$500 fee once you begin the course? YES NO <b style="color: red;">FEE WAIVED SAMHSA supported training for a limited time	
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Please let us know of any accommodations necessary for the training:

Signature	Print Name and Date
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109 East Lewis Street
 Livingston, MT 59047
 406-551-1058 www.mtpeernetwork.org
 If you have any questions please direct them to:
 Jim Hajny, Executive Director jim@mtpeernetwork.org

Once this application has been received and processed in our office you will receive an email confirmation. Approximately two weeks before the start of the training you will receive via the US Postal Service a packet which includes information of the location, dates and times each day of the training, homework assignments and pre-reading to be completed before the start of training.