

Depression and Bipolar Support Alliance

Training Description

DBSA Peer Specialist training prepares people who live with mental illnesses to use their experiences to work with others as peer specialists. Facilitated by nationallyrecognized trainers, this comprehensive course delivers a foundation in recovery principles, intervention techniques, and ethical practice. Curriculum focuses on the use of peer-delivered services to support the recovery of others. DBSA Peer Specialist training is delivered in affiliation with Appalachian Consulting Group, Inc., innovators of the Georgia Certified Peer Specialist Project that pioneered Medicaid billable peer support services.

DBSA Peer Specialist Training

April 23-27, 2012

Chicago, Illinois

Who Can Participate

- Individuals age 18 or older with personal experience as consumers of mental health services who wish to use this experience to assist others
- Those willing to publicly identify as a person living with a mental illness

[Please do NOT apply if you do not meet these first two standards.]

- DBSA especially encourages people
 who currently hold a peer specialist position or who are actively seeking such
 a position (paid or volunteer) to apply,
 although this is not a requirement to
 participate.
- DBSA actively seeks a diverse group of training applicants with respect to race, gender, age, sexual orientation, diagnosis, and disability.

Requirements

Training participants must commit to

- attend and actively participate in all five days of training.
- participate in discussion and role-plays utilizing solely their personal experiences as mental health consumers rather than any clinical roles or training.
- take a written certification examination within four weeks of training completion.

Location

Chicago School of Professional Psychology 325 N. Wells St., Chicago, IL 60654

Dates

Training begins on Monday, April 23, 2012, at 9:30 a.m. and ends on Friday, April 27, 2012, at approximately 12:00 p.m.

ALL APPLICATIONS MUST BE **RECEIVED BY DBSA NO LATER THAN MARCH 19, 2012.**

Please mail or fax your completed application to:

Training Department DBSA

730 North Franklin Street, Suite 501 Chicago, Illinois 60654

Phone: (800) 826-3632 Fax: (312) 642-7243

Do not submit payment with this application. This is an application only and does not guarantee you will be selected.

Selection: Enrollment is limited, and participants will be selected through a competitive application process. All applicants will be notified of their status no later than March 28, 2012. Registration payment is due April 11, 2012.

Registration Fee

\$975 per person includes training fee, all training materials, and post-training certification testing. Registration fees will be due at a later date. Do not submit payment with this application. Fee does NOT include hotel accommodations, travel, or meals. Participants are responsible for paying these costs or obtaining outside funding support.



Training topics include:

- Role of peer support in recovery
- Problem solving with individuals
- Effective listening and the art of asking questions
- Combating negative self-talk
- Dissatisfaction as an avenue for change
- Facilitating Recovery Dialogues[©]
- Peer specialist ethics ... and more

Application for Participation 2012 DBSA Peer Specialist Training

April 23-27, 2012

Please answer the following questions to the best of your ability. This is not a "test" about right and wrong answers. Your responses will help us get to know you and will assist the Selection Committee in identifying and selecting qualified applicants. Make sure to answer all questions and sign your application. Write your answers on a separate sheet of paper, and submit them along with this application. If you handwrite your answers, please make sure they

Demographic Information
Please provide the following
optional information to help
ensure diversity of the training
group. Aside from using aggregate numbers, DBSA will not
maintain or use this information in any way.

are readable. THANK YOU!

GENDER

П	M	al	е	П	F	er	n	al	e

AGE

- □ 18–25
- □ 26–39
- □ 40–55
- □ 56+

PHYSICAL DISABILITY

□ Yes □ No

ETHNICITY

- ☐ Asian/Pacific Islander
- ☐ American Indian
- ☐ Black (not of Hispanic origin)
- ☐ Hispanic
- ☐ White (not of Hispanic origin)
- □ Other

1. Understanding and Interest

- **A.** Why do you want to become a peer specialist?
- **B.** What makes you a good candidate to work with other consumers in the mental health field?

2. Recovery Experience

- A. What does recovery mean to you?
- **B.** What were/are important factors in your own recovery?
- **C.** What types of experiences have you had in assisting, or advocating for, consumers of mental health services (for example, support group leadership, self-advocacy, public testimony, programs you started, etc.)? Please be specific.

3. Environment and Access

YOUR SIGNATURE

A. Do you currently hold a position where you will use	the skills gained through						
Peer Specialist training and certification?	□ Yes □ No						
If yes, do you receive pay for this position?	□ Yes □ No						
Position title/location							
B. Are you a current candidate for a position where yo	u will use the skills gained						
through Peer Specialist training and certification?	□ Yes □ No						
If yes, will you receive pay for this position?	□ Yes □ No						
Position title/location							
NAME							
STREET ADDRESS							
CITY STATE ZIP	-						
PHONE NUMBER(S)	-						
FAX NUMBER E-MAIL	-						
NOTE ANY SPECIAL ACCOMMODATION REQUEST	S						
Please initial all items below to indicate your under	rstanding of each:						
I certify that I have personal experience as a consu	umer of mental health services.						
If I am chosen as a training participant, I understand that I am responsible for funding my							
own registration fee, travel, hotel accommodations	, and meals.						
I understand that participating in the DBSA Peer S	pecialist training does not guarantee						
me employment or a volunteer position.							
I understand that payment is due by April 11, 2012.							

Important: Each individual state or service delivery system sets its own peer specialist training and certification standards. Please check local requirements with your state certification body, office of consumer affairs, or service delivery system before making the decision to participate in this training course. DBSA can provide you with information on training curriculum content.

PLEASE ALSO PRINT YOUR NAME