

This 46 hour 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 fellow Veterans. Course training content is equivalent to DBSA-VA contract courses for peer support training/certification of individuals employed by the VA as peer specialists, and successful completion of this training course and all associated examinations meets current VA certification requirements for individuals employed as peer support specialists.

Training Components & Dates

PODCAST

Listen to a recorded podcast and provide online feedback

AUDIOCONFERENCE

Thursday, April 14, 2016
10:00 AM–2:00 PM Central time

FACE-TO-FACE TRAINING COURSE

April 18–23, 2016

POST-COURSE EXAMINATION

Online test must be completed between April 27–May 3, 2016

Who Can Participate

Veterans seeking employment or a dedicated volunteer role as a peer specialist. For Veterans interested in becoming eligible for employment as a VA peer specialist, please note that in order to qualify for such a position, an individual must be:

- a Veteran who has recovered or is recovering from a mental health condition (including addictions), and
- certified by a qualifying organization (DBSA is such an organization), or by an appropriate state mental health department's approved process.

For additional information on VA peer support employment requirements, please visit: vacareers.va.gov/peer-to-peer, or contact the human resources department at your local VA facility or Dan O'Brien-Mazza, VA National Director of Peer Support Services: Daniel.O'BrienMazza@va.gov, or (315) 565-5179, or Laura Gomez, EES, Laura.Gomez2@va.gov or (314) 894-5742.

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 25, 2016 and payment deadline is no later than April 1, 2016.

Registration Fee

\$1,995 per person includes training fee, all training materials and post-training certification testing.

DBSA Veteran peer specialist training is approved for G.I. Bill benefits by the Illinois Department of Veterans Affairs, and eligible Veterans from any state who complete this course can be reimbursed for the cost of certification (1/3 of the total registration fee, or \$665).

For information about eligibility, please contact your state Veterans Benefits Office or Department of Veterans Affairs Vocational Rehabilitation Services. For additional funding ideas, please visit www.DBSAlliance.org/FindingFunds.

Participants are responsible for reserving and funding their own travel, hotel accommodations, and meals associated with face-to-face training.

**ALL APPLICATIONS
MUST BE RECEIVED
BY DBSA NO LATER
THAN March 18, 2016**



2016 DBSA Veteran Peer Specialist Training Application

April 18–23, 2016

Please answer the following questions to the best of your ability. Your responses will help us get to know you and assist in selecting qualified applicants. Make sure to answer all questions and sign your application. **Write your answers on a separate sheet of paper, and submit along with the application.**

1. Understanding and Interest

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

2. Personal 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, Veterans or other people?

3. Environment and Access

- 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 _____

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.

GENDER

- Male
- Female
- Trans*
- I prefer not to disclose

AGE

- 18–25
- 26–39
- 40–55
- 56+

ETHNICITY

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

NAME _____

STREET ADDRESS _____

CITY / STATE / ZIP _____

PHONE NUMBER(S) _____

E-MAIL _____

SPECIAL ACCOMMODATION REQUEST _____

EMERGENCY CONTACT NAME AND PHONE NUMBER _____

Please keep me informed on news and updates on DBSA related activities, courses and more! Yes No

Please initial all items below to indicate your agreement with each:

- _____ I am a Veteran, discharged under other than dishonorable conditions
- _____ I have been in recovery from a mental health condition and/or addiction for a minimum of one year.
- _____ I understand this training is only a partial requirement to qualify as a VA Peer Support Specialist.
- _____ I understand that I am responsible for all funding including registration fees, travel and meals.
- _____ I understand payment of \$1,995.00 is due by April 1, 2016
- _____ I agree to attend and actively participate in all 6 days of training.

SIGNATURE _____ PLEASE ALSO PRINT YOUR NAME _____

Please mail, email, or fax your completed application to:
Training Department
DBSA
55 E. Jackson Blvd., Suite 490
Chicago, IL 60604
Fax: (312) 642-7243
Email: Training@DBSAlliance.org
Phone: (800) 826-3632