### **North Carolina Peer Support Specialist Training**

## **Training Application**

### **Overview of Peer Support Specialist Training**

- The content of Cardinal Innovations Healthcare's Peer Support Specialist Training has been approved by the Behavioral Healthcare Resource Program (BHRP) and North Carolina Division of Mental Health Developmental Disabilities and Substance Abuse Services (NC DMH/DD/SAS).
- Peer Support Specialist Training is a 40 hour training. Participants must be present and participate for all scheduled 40 hours in order to be considered for certification.
- Participants are required to participate in the trainings through lectures, group activities, role-playing
  and take home activities. You will also be required to share your personal recovery story.
- Participants who were present for the entire training will be awarded a certificate of completion.
- In order to be able to apply for your state certification, the trainee must pass the exam at the end of the
  training. The trainee can request another opportunity, within a designated period of time, to re-take the
  exam if they do not pass the first time.
- Completion of this training does not guarantee that the participant will be hired as a Peer Support Specialist. The participant will be responsible to apply and seek employment with applicable providers within their communities.
- Training topics include Role of Peer Support Specialist, Substance Abuse and Co-Occurring Disorders, Recovery Tools, Cultural Diversity, Workplace Skills and Peer Support Code of Ethics.
- Maximum class size is 20 participants.

### **Qualifications to take Peer Support Specialist training**

- 18 years or older
- Have lived experiences in recovery from a significant mental health or substance use disorder
- Have been in recovery for at least 12 consecutive months
- Have at least a high school diploma or equivalent

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# **Training Application**

Date of application	Date of training
Location of training	
Name	
Address	
Phone	Email
Date of Birth	
Why are you interested in becoming a Peer Sup	oport Specialist? (500 characters max)
Do you consider yourself in recovery? If so, how	v long? (500 characters max)
Describe your recovery experience from substan	nce use, mental health challenges or both. (500 characters max)

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Keeping in mind that sharing your story ot lived experience can be very emotional, describe how you are	willing and	able
to share your lived experience, as a tool, with others. (500 characters max)		

What strengths do you have that would make you a g	ood Peer Support Specialist? (500 characters max)
Have you applied to attend a Peer Support Specialist	Training anywhere else? If so, where and when? (500 characters max)
7.2. 7.2. approx. 2.2. 2.2. 2.4. 2.4. 2.4. 2.4. 2.4. 2.	
Applicant's Signature	
Printed Name	Date

#### **Submission Instructions**

- Applications must be completed, including the 2 requested references, prior to being reviewed.
- Completed applications should be received no later than 30 days prior to the next scheduled training.

  If the application is not received 30 days prior, you will be notified and placed "on-hold" until the next scheduled training.
- Completed applications should be mailed to:
- Applications that are approved to move forward with the training, will be notified 14 days prior to the next scheduled training.