

## 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:**

	<b>Email:</b>	<b>Phone:</b>
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**Current address:**

<b>City:</b>	<b>State:</b>	<b>ZIP Code:</b>

### DEMOGRAPHIC INFORMATION (THIS INFORMATION IS USED FOR DATA COLLECTION PURPOSES ONLY THIS HELPS US TO BETTER UNDERSTAND WHO IS APPLYING FOR TRAINING)

**Ethnicity:** White Native American African American Hispanic Asian Pacific Islander Other \_\_\_\_\_

<b>Sex:</b> male female	<b>Date of Birth:</b>	
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<b>Are you currently employed?</b> YES NO	<b>Do you have stable housing?</b> YES NO	
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### ACCOMMODATIONS

**Please let us know of any accommodations necessary for the training:**

This information is used to curtail the training to your specific needs

<b>Are you a candidate for or do you currently hold a position as a peer supporter?</b>  YES NO	<b>If NO, do you plan to apply for a position as a peer supporter after training?</b>  YES NO	
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**If YES, who is your employer?**

<b>If YES, how long have you been employed as a peer supporter?</b>	<b>What is your title?</b>
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<b>What is your rate of pay?</b>	<b>How many hours per week do you work?</b>	
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**What other peer support related trainings have you attended?**

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

**What are your areas of strength as a peer supporter?**

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

**What components of training do you feel could benefit you the most?**

**Have you completed the Readiness self assessment?**

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**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.

<b>Are you able to attend all 40 hours required for this training? YES NO</b>	<b>Do you understand there is a non-refundable \$500 fee once you begin the course? YES NO</b>	
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<b>Signature</b>	<b>Print Name and Date</b>
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109 East Lewis Street  
Livingston, Montana 59047  
406-551-1058  
[www.mtpeernetwork.org](http://www.mtpeernetwork.org)

Jim Hajny  
Executive Director  
[jim@mtpeernetwork.org](mailto:jim@mtpeernetwork.org)

Peer Support 101

40 hour Training Outline Level 2 peer support

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## Montana Peer Supporter Readiness Self-Assessment

This self-assessment is a readiness tool to help you determine if you are ready to become a peer supporter. Please answer yes or no to the following questions.

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, substance abuse and or addiction diagnosis?
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 your recovery?
8. Can you describe the role that a sense of hope played in your life?
9. Can you describe some of the community supports you currently use or have used in the past?
10. Have you ever lead a support group?
11. Do you have any experience with advocacy organizations in Montana?
12. Do you have any experience volunteering or serving on boards or committees?

Each question you answer yes to please write a detailed answer on a separate piece of paper to help you further determine your readiness. Some employers may utilize this assessment as interview questions. Being prepared ahead of time will give you an advantage.

\_\_\_\_\_ Total number of Yes answers you have.

A score of 12 to 9 indicates you are more than likely ready to pursue work as a peer supporter.

If you answered yes for 8 to 6 you may be ready and 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 still choose to pursue this type of work but we recommend strengthening some areas of knowledge and experience.

If you scored a yes for 5 to zero you may not be ready just yet to pursue work as a peer supporter. If this is 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.