

Peer-to-Peer

**Mentor Application**

**Georgia Training**

Mercer University  
School of Nursing  
3200 Flowers Rd  
Atlanta, GA 30341

**January 28 – 30, 2011**

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone (H) \_\_\_\_\_ Cell \_\_\_\_\_ (W) \_\_\_\_\_

Email \_\_\_\_\_ Fax \_\_\_\_\_

Best time to call \_\_\_\_\_

Reference (Name and email or phone) \_\_\_\_\_

\_\_\_\_\_

(Please note: Your reference should be someone who knows you well enough to recommend that you be trained to become a Mentor)

Are you a member of NAMI? Yes \_\_\_\_\_ No \_\_\_\_\_

If **no**, are you willing to join? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of a felony? Yes \_\_\_\_\_ No \_\_\_\_\_

If **yes**, please explain:

Please tell us why you want to be a NAMI Peer-to-Peer (P2P) mentor?

## Peer-to-Peer

### Job Requirements:

- ✓ Willingness to undergo training and to adhere to fidelity to the NAMI Peer-to-Peer model.
- ✓ Commitment to conduct two Peer-to-Peer classes within a two year period.
- ✓ Ability to provide group participant data as required
- ✓ Willingness to identify potential new Peer-to-Peer mentors.
- ✓ Be or become a member of NAMI
- ✓ Coordinate presentations with Affiliate or local Support Group leadership

Do you have your own transportation? Yes \_\_\_ No\_\_\_

Public Transportation? Yes \_\_\_ No\_\_\_

Are you willing to travel? Yes\_\_\_ No\_\_\_

If yes, how far: \_\_\_ 5-10 miles \_\_\_ 11-20 miles \_\_\_ More than 20 miles

What language(s) other than English do you speak fluently?

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### Information needed should you be selected to attend training:

1. Do you have any dietary restrictions or food allergies? If so please specify.
  
2. Do you need any special accommodations that we should be aware of? If so please specify.
  
3. Will you be requiring overnight accommodations for Thursday night? Yes\_\_\_ No\_\_\_
  
4. Do you have transportation? Yes\_\_\_ No\_\_\_\*
  
- \* If yes, would you be willing to transport other participants? Yes\_\_\_ No\_\_\_

## Peer-to-Peer

### 5. Agreements

- I have read and understand the NAMI Peer-to-Peer mentor job requirements.  
\_\_\_\_\_ (initial)
- I understand that if there are more applicants than training slots, I may be placed on a Waiting List for the Training. If I am, I will keep the Training Weekend open in the event a training slot opens up for me.  
\_\_\_\_\_ (initial)
- I understand that my attendance at Peer-to-Peer Training does not guarantee that I will be certified as a NAMI Peer-to-Peer (P2P) mentor.  
\_\_\_\_\_ (initial)
- If selected to attend - Attending the NAMI Peer-to-Peer Training, and receiving certification as a Mentor, I acknowledge that I am making a commitment to conduct at least two Peer-to-Peer classes within a two year period.  
\_\_\_\_\_ (initial)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature)

**PLEASE FILL OUT AND RETURN BY JANUARY 17, 2011 TO:**

**Jean Dervan  
NAMI Georgia  
3050 Presidential Drive Suite 202  
Atlanta, GA 30340  
Fax- 770-234-0237  
jdervan@nami.org**