



Peer Support Canada

Application for Peer Support Mentor Certification

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1. Applicant Information

Date

Name

Address,

City, Province

Postal Code

Email

Preferred

Phone #

Alternate

Phone #

2. Criteria for Application

- Certification as a Peer Support Canada Certified Peer Supporter or Family Peer Supporter
- Five years involvement in Peer Support work, with skills and expertise in one or more of the following:
 - Peer Support program development or management
 - Peer Support coordination
 - Mentoring or training of peer supporters

The lived experience and Code of Conduct requirements for Peer Supporter Certification remain in place for candidates for Peer Support Mentor Certification.

- I understand that the fees are as follows: \$90 Application, \$440 Exam, \$1220 Practicum (plus tax)
- I understand that during the Practicum Phase, I will need to allocate 1.5 hours a week for approximately 35 weeks
- I understand the Mentor Certification Process will take a minimum of 12 months to complete

3. About You

Use as much space as you'd like.

1. Why are you interested in becoming a Peer Support Canada Certified Peer Support Mentor?
2. What do you hope to get out of this process?
3. How is the role of a Mentor different from the role of a Peer Supporter?
4. Tell us about your personal attributes, skills and abilities that help you in your role as a mentor?
5. Tell us about your experiences as they relate to mentoring Peer Supporters.

4. About Your Experience

Tell us about your experience as it relates to mentoring and peer support. Use as many pages as you need. As part of the assessment process, Peer Support Canada will be in touch with the organizations to confirm your acquired experience.

Most recent role

A) Organization:

City, Province:

Type of Organization:

EG: Clinical site, Community organization, Workplace (providing peer support to colleagues), Other (please describe)

Contact Name at Organization:

Phone

Contact Email:

B) Number of years and months providing peer support at this organization (*only fill in applicable lines*):

Start Date:

On a full-time basis (30+ hrs per week)	Years	Months
On a part-time basis (12-29 hrs per week)	Years	Months
On a casual basis (less than 12 hrs per week)	Years	Months

C) Please provide an approximate % breakdown on how much time was spent on:

Direct Peer Support	%
Peer Support Program Development	%
Peer Support Program Coordination/Management	%
Mentoring or Training Peer Supporters	%
Advocacy	%
Other:	%

Briefly describe your role(s) and responsibilities, and what skills you developed.

4. About Your Experience Continued

Second most recent role

A) Organization:

City, Province:

Type of Organization:

EG: Clinical site, Community organization, Workplace (providing peer support to colleagues), Other (please describe)

Contact Name at Organization:

Phone

Contact Email:

B) Number of years and months providing peer support at this organization (only fill in applicable lines):

Start Date:

On a full-time basis (30+ hrs per week)	Years	Months
On a part-time basis (12-29 hrs per week)	Years	Months
On a casual basis (less than 12 hrs per week)	Years	Months

C) Please provide an approximate % breakdown on how much time was spent on:

Direct Peer Support	%
Peer Support Program Development	%
Peer Support Program Coordination/Management	%
Mentoring or Training Peer Supporters	%
Advocacy	%
Other:	%

Briefly describe your role(s) and responsibilities, and what skills you developed.

4. About Your Experience Continued

Third most recent role

A) Organization:

City, Province:

Type of Organization:

EG: Clinical site, Community organization, Workplace (providing peer support to colleagues), Other (please describe)

Contact Name at Organization:

Phone

Contact Email:

B) Number of years and months providing peer support at this organization (*only fill in applicable lines*):

Start Date:

End Date:

On a full-time basis (30+ hrs per week)

Years

Months

On a part-time basis (12-29 hrs per week)

Years

Months

On a casual basis (less than 12 hrs per week)

Years

Months

C) Please provide an approximate % breakdown on how much time was spent on:

Direct Peer Support	%
Peer Support Program Development	%
Peer Support Program Coordination/Management	%
Mentoring or Training Peer Supporters	%
Advocacy	%
Other:	%

Briefly describe your role(s) and responsibilities, and what skills you developed.

5. Next Steps

Thank you for taking the time to complete this application. *Please keep a copy for your records.* Your application will be viewed by members of the Peer Support Canada Certification Committee and staff. The contents of your application will be kept confidential by Peer Support Canada.

Please save this file as *lastname firstname Mentor Application* and email to: certification@peersupportcanada.ca

The Application Fee is \$90 (\$101.70 with tax)

- Please invoice me
- Please invoice my employer/other

Name:

Email and Phone:

If you have any questions at any time, please don't hesitate to reach out to us at certification@peersupportcanada.ca

You can expect to hear back from us in 6-8 weeks about the status of your application.

Following this phase, you will be invited to complete the Knowledge Assessment. Feedback on your Knowledge Assessment will be shared back with you, including areas of strength and areas for development.

The final phase is the Practicum, during which you co-mentor approximately three Peer Support Certification Practicums. You will be paired with a Certified Peer Support Mentor, and as you are more confident in the process you will take on more of the leadership role until you are comfortable and confident. Following completion of the practicum there is a final assessment. The Certification Committee makes all recommendations for Certification.

Welcome!