

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Personal Statement:**

- Describe your experience as a certified peer support specialist II
- How you will continue to provide direction, develop competence, skills and experience in a collaborative manner with peer support specialists I's.

I certify that I have given true, accurate, and complete information on this form to the best of my knowledge regarding the applicant.

Electronic Signature: \_\_\_\_\_ Date: \_\_\_\_\_