

Peer-to-Peer Participant Application 2017

This 10-week, unique, experiential recovery program is for people living with mental illness interested in establishing and maintaining their wellness and recovery.

☐ **Date: Tuesday, January 10-March 14, 2017 Location:** Chalmers P. Wylie VA Ambulatory Care Center, 420 N. James Rd., Conf. Room 2A092 (2nd Floor), Columbus 43209 **Time:** 6:00-8:00 p.m.

☐ **Date: Tuesday, March 28-May 30, 2017 Location:** Chalmers P. Wylie VA Ambulatory Care Center, 420 N. James Rd., Learning Center (1st Floor), Columbus 43209 **Time:** 6:00-8:00 p.m.

☐ **Date: Tuesday, June 13-August 15, 2017, Location:** Chalmers P. Wylie VA Ambulatory Care Center, 420 N. James Rd., Learning Center (1st Floor) Columbus 43209 **Time:** 6:00-8:00 p.m.

☐ **Date: Tuesday, August 29-October 31, 2017 Location:** Chalmers P. Wylie VA Ambulatory Care Center, 420 N. James Rd., Learning Center (1st Floor), Columbus 43209 **Time:** 6:00-8:00 p.m.

Please print the following:

Name: _____

Address: _____

Phone: _____ Email: _____

Diagnosis: _____

- 1) Why are you interested in taking the Peer-to-Peer course?
- 2) Will you agree to keep confidential the disclosures of other participants? **Yes** **No**
- 3) Will you agree to speak to others only of your own experiences? **Yes** **No**
- 4) Ten weeks is a substantial time commitment for a course. Do you foresee any attendance problems?
Yes (please explain below) **No**
- 5) Are you currently in treatment with a psychiatrist, therapist, or other health care provider?
Yes **No**
- 6) Do you have any chemical sensitivities, special needs, allergies we need to be aware of?
Yes (please explain below) **No**

How did you hear about this class? _____

Thank you for taking the time to fill out this application. Please return it to:
**NAMI Franklin County / 1225 Dublin Road, Suite 110 / Columbus, OH 43215, or fax to (614) 501-6267
(614) 530-4554 / Email: mail@namifc.org**