WEA Chinook

Peer Support Program Application

The Peer Support Program is designed to help our members improve their professional skills. It is offered only to members and is designed to assist those who request peer support.

All decisions concerning design and implementation of an individual program will be made with the full consent and approval of the applicant.

Confidentiality will be respected, and personal information will be available only to the members of the Peer Support Program Committee and assigned UniServ staff.

To be filled out by Applicant

Full Name: _____ Date: _____

Last   *First*   *M.I.*

Address: _____

Street Address   *Apartment/Unit #*

_____

City   *State*   *ZIP Code*

Home Phone _____ Cell Phone _____ Home Email _____

Work Location _____   School District _____

Job Assignment _____   Check box if you would prefer a BIPOC mentor? ☐

How long in profession? _____   How long in district? _____

Brief General Statement of Reason(s) for Request

_____
_____
_____

Specifically, what professional skills would you like to improve, or in what areas would you like assistance?

_____
_____
_____
_____
_____
_____
_____

To Be Completed by WEA UniServ Office

Membership ID/Verified? _____ Checked By _____ Date: _____

Return to : WEA Chinook – Email: jlael@washingtonea.org or FAX (360) 943-0675
5220 Capitol Blvd SE, Tumwater, WA 98501