

Recovery Coach Application

April 2012

If you would like to attend the Recovery Coach Training, please complete the following application. Reply to Laura Czepiel Laura.czepiel@dshs.state.tx.us and Sheri Jackson Sheri.Jackson@dshs.state.tx.us.

Contact Information

Name:

Street Address:

City:

Zip Code:

Home Phone:

Work Phone:

E-Mail Address:

Class Date and Location

Please indicate the Class Date and Location you will be attending:

Midland/Odessa
May 21-25, 2012

San Antonio
June 11-15, 2012

Dallas/Fort Worth
June 4-8, 2012

Beaumont
June 18-22, 2012

Experience

Please indicate YES or NO to the following questions

- Do you have prior training experience?

YES NO

- Do you plan to provide recovery coach trainings?

YES NO

- Do you have personal experience assisting those individuals who are in recovery?

YES NO

- Are you a Peer with experience of recovery from substance use and/or mental health?

YES NO

Thank you for completing this application and for your interest in becoming a trainer for recovery coaches. If you have any questions you can contact Laura (512) 206-5890 or Sheri (512) 206-4638.