# Peer Support ‘Train the Trainer’ Application Form

Please complete this form to apply to become a Student Minds Peer Support Trainer.

Please ensure you have read the guidelines available on our website and are able to fulfil the conditions of the trainer agreement before submitting this form. If you have any questions or would like to speak to a member of the Student Minds team please email operations@studentminds.org.uk.

### Your contact details

|  |  |
| --- | --- |
| Full name: | Email Address: |
| Address:  | Telephone Number: |
| Job Title: | Employer: |

### Employer contact details

|  |  |
| --- | --- |
| Name: | Role: |
| Email Address: | Telephone Number: |

### Contact details for invoice (if different from above)

|  |  |
| --- | --- |
| Name: | Address: |
| Email Address: | Telephone Number: |

**Application questions**

**General**

1. **What do you understand by the term ‘mental health’?**

|  |
| --- |
|  |

**2. What do you think the benefits and challenges of ‘peer support’ are?**

|  |
| --- |
|  |

**3. Why do you want to be a Student Minds Peer Support Trainer?**

|  |
| --- |
|  |

**4. How do you intend to implement peer support courses at your institution? Please also explain how this fits into your current role.**

|  |
| --- |
|  |

**Experience**

**5. What your personal/professional experience in the field of mental health?**

|  |
| --- |
|  |

**6. Please list any other relevant qualifications, training or courses.**

|  |
| --- |
|  |

**7. Using no more than 500 words, please provide evidence of your ability to perform each of the following key duties: volunteer management, training delivery, supervision and policy development. Please ensure that you provide tangible examples that outline how your skills, knowledge and experience meet these requirements. (N.B experience in these areas is not essential in order to be successful)**

|  |
| --- |
|  |

**8. Do you have any other skills or experience that you feel may be relevant?**

|  |
| --- |
|  |

**Declarations:**

By returning this application to Student Minds I confirm that the information given is, to the best of my knowledge, true and complete. I am fully aware that any false statement may be sufficient cause for rejection.

Yes, I am able to commit to the time needed to train myself, deliver Student Minds’ courses and fulfil the conditions of remaining registered. Full details of these conditions can be found on our website.

**Signed:
Date:**

**Privacy Statement**

Any personal data relating to applicants will be used solely in accordance with current UK data protection legislation, and will not be disclosed to a third party without the individual's prior consent. Any personal data that you supply will be used by Student Minds to inform you about current and upcoming opportunities, for data collection purposes and if successful, for ongoing support.

❒ I have read and understood the above statement and I'm happy for Student Minds to use my details in this way

❒ I would like to be kept up to date with Student Minds' projects and news, please add me to the national newsletter

**Student Minds Cancellation Policy**

If I cancel within two months of the first date of the training course, Student Minds reserves the right to charge 50% of the training fee. I understand that if I cancel within four weeks, do not attend, or do not complete the training programme, I will be charged at the full rate. Cancellations must be sent in writing to Student Minds, to operations@studentminds.org.uk and are only valid once receipt has been confirmed.

Yes, I have read, understood, and agreed to abide by Student Mind’s cancellation policy.

**Signed:
Date:**

**Final steps: applying**

Please send your completed application and letter of support to: **operations@studentminds.org.uk**

If your application is accepted, you will then be sent an invoice for the programme fees. Details of the fees can be found on our website. The training course is non-residential and participants must arrange their own accommodation.