



Mood Disorders Association of Ontario



Volunteer Speakers' Bureau Program Peer Talk Application Form

Please note: to submit this form, all fields marked with an asterisk * require a reply.

Applicant Information

Full Name *

Preferred Pronoun (select one) *

She/Her

He/His

They/Their

Other

If 'Other', please describe:

E-mail Address *

Phone Number *

Address *

(continues next page)

City, Town, Village *

Province *

Postal Code *

Your Date of Birth *

Languages spoken (*check all that apply*) *

English

French

Cantonese

Mandarin

Hindi

Urdu

Spanish

Italian

Portuguese

Arabic

German

Korean

Tagalog

Vietnamese

Other

If 'Other', please describe:

(continues next page)

If you have taken part in Hope + Me - MDAO's programs as a client and/or participant, have at least six (6) months elapsed since you last received services from us? *

Yes, at least 6 months have passed since I have received services from Hope + Me

No, I have received services from Hope + Me in the past 6 months

Not applicable; I have never received services from Hope + Me

If you answered 'No' to this question, please consider re-applying to Peer Talk when six (6) months have passed after receiving services at Hope + Me - MDAO.

Are you currently a volunteer at Hope + Me - MDAO? *

Yes

No

Please tell us why you are interested in being a member of *Peer Talk*. *

Lived Experience

One of the hallmarks of Peer Talk is the ability to inspire hope and raise awareness through speakers sharing their own experiences living with or supporting others with mental illness.

Briefly describe your lived experience as it pertains to mental health. *

What kinds of topics are you interested in giving talks on, and why? *

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Please describe your experience in delivering presentations or speeches. If you have none, please let us know. *

Your Availability

Peer Talk meetings take place twice a month on alternating Wednesday and Thursday evenings starting at 7:00 PM and ending at 8:30 PM. There may be other social and Community of Practice meetings at other times. Please indicate your availability.

Check the monthly Peer Talk meeting days and times that work for you.

Wednesday Evening

Thursday Evening

Check all the days and times that work for other meetings.

Mondays

Morning

Afternoon

Evening

Tuesdays

Morning

Afternoon

Evening

Wednesdays

Morning

Afternoon

Evening

Thursdays

Morning

Afternoon

Evening

(continues next page)

Fridays

- Morning
- Afternoon

Meetings are held twice per month, so there will be a total of 12 meetings. Can you attend at least six (6) meetings over a period of six (6) months? *

- Yes
- No

Your References

Please list three (3) references, including at least one professional and/or academic reference, and their contact information below.

Reference #1

Name *

Relationship to Applicant *

E-mail Address *

Phone Number *

Alternate Phone Number

(continues next page)

Reference #2

Name *

Relationship to Applicant *

E-mail Address *

Phone Number *

Alternate Phone Number

Reference #3

Name *

Relationship to Applicant *

E-mail Address *

Phone Number *

Alternate Phone Number

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A criminal background check is required to volunteer with Hope + Me - MDAO. Are you willing to complete a criminal background check? *

Yes

No

When you complete this form, please save the file and, along with your most recent résumé, attach to an e-mail message and send to the Program Coordinator at madelines@hopeandme.ca.

