

Community Conversations on Building a Sustainable Peer Workforce: SUMH Peer Conference Career Fair Application

Business Name:

Contact Person:

Business Address:

Telephone Number:

Email Address:

Type of open positions:

Position(s) description: ***(Please attach job description(s) and agency profile)***

1. Do you plan to hire a Certified Peer Recovery Advocate or Peer Specialist:

Within the next __ 1-3 Months; __ 3-6 Months; __ 6-12 Months; __ Not sure at this time
2. Will you be prepared to accept resumes with cover letters at this event:
3. Will you be prepared to conduct interviews at this event:
4. Will you accept applications online? If so, what is the website address for submission:
5. Do we have permission to use your company's name in the promotion of this event:
6. Total number of lunches required (2 maximum per table):

PLEASE EMAIL YOUR COMPLETED APPLICATION TO wgaines@health.nyc.gov