

Iowa Board of Certification

MENTAL HEALTH PEER SUPPORT SPECIALIST (MHPSS) APPLICATION FOR RECERTIFICATION (Page 1 of 2)

Complete this form online, save it to your computer, and email it to IBC at info@iowabc.org. It may also be printed and mailed to the IBC office.

Name (as you want it typed on your certification Other last names you have used	cate)		
Certificate Number Cer	rtificate Expiration		
Highest Level of Education: H.S S	ome College Associat	es Bachelors Masters De	octorate
Home Address	.		
City, State, Zip Code			
Phone Number ()	Cell	E-Mail	
Note: IBC will occasionally send text messages from IBC: Yo			
Current Place of Employment			
Address			····
City, State, Zip Code			
Telephone Number ()	E-Mail _.		
Have you ever had any credential (i.e. sanctioned? Yes No (If yes, on the what reason, and the current status of	the back of this page in		
PROFESSIONAL DEVELOPMENT DOC Total number of professional developmen		orded on page 2 (minimum of 2 ⁴ <u>Number of Hours</u>	1 hours):
2 clock hours Ethics Relevant Education clock hours Total Hours			
FEE Recertification Fee: Late Fee (if 1-45 days late postmarked): CEU Approval Fee (if applicable) - \$15.00 distance learning & non-IBC application of the check/money of the check/mon	proved trainings		
APPLICANT SIGNATURE		DATE	

SEND BOTH PAGES OF THIS APPLICATION AND REQUIRED FEE(S) TO:

info@iowabc.org or Iowa Board of Certification, 225 NW School St., Ankeny, Iowa 50023

Iowa Board of Certification



Verification of M.H. Peer Support Specialist (MHPSS) Professional Development

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<u>Directions</u>: Complete this Form for your recertification - you may make copies of this form if you need more space. You do <u>NOT</u> need to submit a **copy** of your certificate of completion trainings listed below, however **be sure to keep copies of your certificates in case your recertification is audited by IBC.**

Name				
Date of Certif	ficate Expiration			
	IBC-Approved Trainings		# of Hours	
Training Date	Title of Training	Ethics	Relevant Ed.	
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		<u> </u>		
		 		
Distance Le	ng is approved by IBC, you will find it on the IBC website and the certificate will clearly ind arning & non-IBC Approved Trainings (\$15.00 CEU Processing Fee owed	for each tra	ining)	
Training Date	Title of Training	Ethics	Relevant Ed	
	_		1	
		 		
			-	
	_	 	1	
Maximum of 12	earning must be accompanied by CEU processing fee, including those approved by 2 hours distance learning allowed.			
Attestation:	l attest that all information above is correct and accurate			
	Signature * * * * * * * * * *			
	(FOR OFFICE USE ONLY)			
Total # clock	hours approved:			
			1	
IBC Signatur	re Date		<u> </u>	