



### **Peer Support Volunteer Application**

Assist collects, uses, and discloses your personal information for the purposes of volunteer assessment, to plan training, and to manage and operate the Peer Support Volunteer Program. Assist is a non-profit society that is independent from the Law Society of Alberta.

#### **PERSONAL INFORMATION:**

Name: **[name]**

Contact phone: **[phone]**

Alternate contact phone: **[alternate phone]**

Leave message: **Yes**

Email: **[email]**

Would you like to receive information by email?

Special instructions, if any, about leaving messages or not leaving messages or restricting email content:

Please indicate your mailing address (optional) for Assist correspondence:

**[street address]**

**[city, province, postal code]**

Are you a member of the Law Society of Alberta?

Are you an Active Member?

Inactive Member?

Retired Member?

Date of call to Bar:

Type of Practice:

How did you learn about the Assist Peer Support program?

Size of Practice:

1 Lawyer

10-50 Lawyers

2-10 Lawyers

51+ Lawyers

Location of Practice:

Large Urban Area

Medium-Sized City

Small City/Rural

Full/Part-Time Practice:

<20 hrs/week

20-40 hrs/week

>40+ hrs/week

#### **EXPERIENCE and/or Motivation:**

Why are you interested in becoming a Peer Support volunteer?



Briefly describe your volunteer or vocational experience working with others in a supportive capacity:

**VOLUNTEER TRAINING:**

Assist provides peer support volunteer training and requires attendance for all peer support volunteers.

Would you be able to attend Volunteer Training in:

Calgary

Edmonton

**REFERENCES:**

Please list two references, other than family members, whom we may contact. With your consent and notice to the Reference person, we would initially email him or her to set up a time for a phone interview to discuss your suitability as a peer support volunteer.

Name: **[name]**

Relationship to applicant (work, volunteer experience together, friend): **[relationship]**

Address: **[street address]**  
**[city, province, postal code]**

Email: **[email]**

Phone: **[phone]**

Name: **[name]**

Relationship to applicant (work, volunteer experience together, friend): **[relationship]**

Address: **[street address]**  
**[city, province, postal code]**

Email: **[email]**

Phone: **[phone]**



**CONFIDENTIALITY Agreement for all volunteers who provide peer support:**

I, the undersigned, promise to hold in confidence all matters that come to my attention in the course of my volunteer service with the Assist Peer Support Program. I will respect the privacy of the people whom I meet and serve and, when appropriate, confer with Assist Peer Support Program Coordinator regarding any concerns I may have. In the course of my volunteer activities, I agree to uphold Assist's Guiding Principles for the Peer Support Program, attached.

Signature: \_\_\_\_\_

Name: **[name]**

Date: **[date]**

Contact Program Manager, Heather Patrao, at 403-537-5508 or email: [program-manager@lawyersassist.ca](mailto:program-manager@lawyersassist.ca). **If you email your application, be aware that your personal information is not secure unless set encrypted.**

*Your personal information is collected and used by Assist for the sole purpose of Assist's Peer Support Program. Assist will treat your personal information confidentially and securely. Assist will not disclose your personal information with others without your prior consent or pursuant to law and with notice to you.*

*If you have any questions, you may contact Heather Patrao or Executive Director, Loraine Champion, at [executivedirector@lawyersassist.ca](mailto:executivedirector@lawyersassist.ca).*

**Assist's Peer Support Program Guiding Principles are attached below  
(please scroll down to view).**



### **Peer Support Mission Statement:**

The Peer Support program matches a lawyer or law student seeking help with a peer that understands the person or problem. Peer Support is a free and confidential program where a volunteer lawyer offers practical, emotional, and social support to a peer.

### **Peer Support Guiding Principles:**

- The safety and security of all parties involved with and affected by the program is of paramount importance.
- We (including our volunteers) adhere to principles of strict confidentiality, within legal & ethical boundaries, in all situations.
- All interactions are discreet, confidential, and respectful.
- We screen, train, and support all Peer Support volunteers.
- Our volunteers do not provide legal, medical, financial, or academic advice to participants. Assist volunteers do not provide direct support to a participant that is beyond the volunteer's competency. We provide referrals in these situations, where appropriate.
- Peer Support does not take the place of professional help or 12-step support.
- Within the boundaries of confidentiality, we measure the progress and success of the program.
- Peer volunteers listen and share their experiences, strengths & hope.
- Peer volunteers will provide referrals to appropriate resources.
- Individuality is respected, while commonality of experience is recognized as a critical guide to a successful peer match.
- Peer volunteers and participants are welcome, at all times, to discuss with each other or the Peer Support Program Coordinator, free of judgment, whether the relationship is compatible. Upon request from either party, the Peer Support Program Coordinator will facilitate a change.
- Setting personal boundaries: Our goal is to help lawyers to alleviate stress, regain health, and/or achieve recovery in part by talking with another lawyer who is willing to listen & discuss. Assist is concerned about the well-being of the Peer Support volunteers and participants, and recommends that the volunteers keep their role clear with the participants. The volunteers and the participants have the right to say "no" to requests that make them feel uncomfortable.
- Peer volunteers and participants recognize that mutual trust is critical to a beneficial relationship and work jointly to foster that trust.