

OHIO MENTAL HEALTH & ADDICTION SERVICES - PEER RECOVERY CERTIFICATION RENEWAL WORKSHEET

REQUIRED CATEGORY	CEU Hrs	CEU SUBMISSION COURSE TITLE / ISSUING AUTHORITY HOST	DATE COMPLETED	COURSE DETAILS	CERTIFICATE RECEIVED Y / N
ETHICS <b>(3.0)</b> <i>(eg. HIPAA &amp; Confidentiality)</i>					
BOUNDARIES <b>(3.0)</b>					
DIVERSITY & INCLUSION <b>(2.0)</b>					
SYSTEM NAVIGATION & CARE COORDINATION <b>(1.0)</b>					
TRAUMA INFORMED CARE <b>(2.0)</b>					
HUMAN TRAFFIC <b>(1.0)</b>					
BEHAVIORAL HEALTH <i>(inc. recovery &amp; resiliency)</i> <b>(1.0)</b>					
HEALTH & WELLNESS <b>(1.0)</b>					
COACHING PRINCIPLES <i>delivering peer service</i> <b>(2.0)</b>					
<b>SUB TOTAL (16.0)</b>	0.00				

REQUIRED CATEGORY	CEU Hrs	CEU SUBMISSION COURSE TITLE / ISSUING AUTHORITY HOST	DATE COMPLETED	COURSE DETAILS	CERTIFICATE RECEIVED Y / N
OTHER CEUs (14.0)					
OTHER CEUs (14.0)					
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OTHER CEUs (14.0)					
OTHER CEUs (14.0)					
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OTHER CEUs (14.0)					
OTHER CEUs (14.0)					
OTHER CEUs (14.0)					
<b>TOTALS (30.0)</b>	0.00				

**GENERAL NOTES:**

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FINAL NOTES	DATE	DETAILS	RECEIPT	CERTIFICATION NUMBER & DATES	NEXT DATE
Submission to OhioMAS					