



United Services, Inc.

Creating healthy communities

Youth Peer Advocate

Students, do you want to be more involved in your community? Do you want to empower other students and make a difference? Do you want to make some money and build your resume? Here is a great opportunity!

Summary:

This is a 5 hour a week internship with a stipend of 100 dollars a month. This position is through United Services, Dayville, and funded by the Prevention in Connecticut Communities Initiative (PCC) grant from the Department of Mental Health and Addiction Services (DMHAS). The Youth Peer Advocate will report directly to the Program Coordinator. The position will last at least 1 year, until June 2022. The Youth Advocate will be responsible for taking part in coalition meetings, outreach to peers, and attending trainings.

Responsibilities:

- Attend Grant mandated meetings
- Assist the coalition during each step of the Strategic Prevention Framework (SPF) and participate in coalition meetings
- Perform other duties as specified by the Program Coordinator
- Interact and engage peers in discussions around substance use

Requirements:

- Is a student living in Killingly or going to school in Killingly between the ages of 15-20
- Has an interest in youth substance use prevention, advocacy in the community, and promoting mental health
- Displays effective communication and interpersonal skills with a willingness to talk to peers around substance abuse and misuse and engage in public speaking
- Ability to work with community members and diverse populations.
- Must be able to commit to 1 year in this position

To Apply:

Please contact Kelsey Hust, Program Coordinator, at khust@usmhs.org with resume, application, and any questions. You may mail application in if you are unable to email it to:

Kelsey Hust

1007 North Main St, Dayville, CT 06241

Youth Peer Advocate Application

Name: _____

Address: _____

School: _____

Grade: _____ Age: _____

Email Address: _____

Cell Phone: _____

Teacher/Advisor Name: _____

Teacher/Advisor Phone: _____

Teacher/Advisor Email: _____

Parent/Guardian Name (If under 18): _____

Parent/Guardian Phone Number (If under 18): _____

Parent/Guardian Signature (If under 18): _____

Are you willing to commit to at least 1 year in this position? Yes No

In a few sentences, why would you like to be a youth peer advocate?
