



Ohio Mental Health and Addiction Services Peer Recovery Supporter Certification
Non-Disqualifying Offense Waiver 5122-29-15.1

Per 5122-29-15.1, an applicant for the Peer Recovery Supporter Certification must have a criminal records check that is free from any convictions, including release from all sanctions, for three years prior to the date of application. Except that individuals with an offense listed in paragraph (I) of this rule shall be permanently excluded from certification and shall not be eligible for a waiver. For individuals who have been convicted of a criminal offense within the 3 years prior to their application for certification and do not have an offense listed in paragraph (I), the applicant may complete and submit this waiver application for review.

The following items MUST be submitted to file this waiver:

1. _____ A Personal Statement including: including information related to conviction, time laps since the conviction, related circumstances, and changes in the applicant's life since the charge or conviction. A detailed explanation of the circumstances surrounding the conviction and reasons why you should be granted a waiver
2. _____ An explanation of how the circumstances surrounding your conviction empowers you to help others on their individual path of recovery
3. _____ A copy of your BCI report

By signing I certify that all the information reported is complete and correct.

• *I understand that waivers are reviewed on a case by case basis and decisions are determined by the merits of the attached documentation.*

• *I understand that if my waiver is approved, I must meet the minimum requirements to become an Ohio Certified Peer Recovery Supporter as outlined in 5122-29-15 and 5122-29-15.1*

Name of Waiver Applicant: _____

Waiver Applicant Phone Number: _____

Date of Waiver Application: _____

Submit all documents to peerservices@mha.ohio.gov

Review of waiver may take up to 3 weeks to complete. You will be notified of the decision via a phone call.