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**Scholarship Application**

**Advanced Training in the DBT Prolonged Exposure Protocol for PTSD**

**March 9-11, 2022 | Virtual Live Training**

**Scholarship Information**

**Purpose:**

The goal of this scholarship is to contribute to reducing the profound disparity in access to mental health treatment among racial and ethnic minority, sexual and gender minority, low-income, and other underserved populations.

**Eligibility Criteria:**

This scholarship is intended for DBT clinicians who:

(1) cannot afford to pay the full registration fee, *and*

(2) work primarily with clients from [NIH-designated health disparity populations](https://www.nimhd.nih.gov/about/overview/).

**Details:**

The scholarship will provide a discount (typically 50%) on the early bird registration fee. There will be 5 scholarships available. Applications are **due by January 1, 2022** and can be submitted by emailing this form to Melanie Harned at mharned@dbtpe.org. Scholarship offers will be made by January 15, 2022.

**Background Information**

**Name:** Click here to enter text.

**Degree:** Click here to enter text.

**Agency:** Click here to enter text.

**Address:** Click here to enter text.

**Email:** Click here to enter text.

**Phone:** Click here to enter text.

**Gender:** Click here to enter text.

**Race/ethnicity:** Click here to enter text.

**Training and Experience**

1. **Have you attended a 4-day Intensive Training in DBT PE?** [ ]  Yes [ ]  No
	1. If yes, when and where did you attend the training?

Click here to enter text.

* 1. If no, please describe your training in DBT PE:

Click here to enter text.

1. **Which modes of DBT are provided in your agency or program?**

[ ]  DBT individual therapy

[ ]  DBT group skills training

[ ]  DBT phone consultation

[ ]  DBT therapist consultation team

1. **How many individual DBT clients are currently on your caseload?**

Click here to enter text.

1. **Approximately what percentage of your DBT clients need DBT PE?**

Click here to enter text.

1. **To date, how many clients have you treated with DBT PE?**

Click here to enter text.

1. **What has your experience been in using DBT PE with your clients? For example, what difficulties have you encountered? What successes have you experienced?**

Click here to enter text.

**Client Population**

1. **What percentage of your DBT clients are from the following NIH-designated health disparity populations?**
2. Racial and ethnic minorities: Enter percentage
3. Sexual and gender minorities: Enter percentage
4. Socioeconomically disadvantaged populations: Enter percentage
5. Underserved rural populations: Enter percentage
6. **Please describe the client population with whom you typically use DBT PE.**

Click here to enter text.

**Scholarship Need**

1. **Why are you interested in attending this training and what are your training goals?**

Click here to enter text.

1. **Please provide information about your need, including what you can afford to pay to attend this training.** (Please note that this scholarship typically provides a 50% discount off the early bird registration fee, which makes the cost to attend $547. You may request more or less than this amount depending on your need.)

Click here to enter text.