**A drawing of a face

Description automatically generated**

**Scholarship Application**

**Using the DBT Prolonged Exposure Protocol for PTSD with Adolescents**

**May 17, 2024 | 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 March 8, 2024** and can be submitted by emailing this form to [admin@dbtpe.org](mailto:admin@dbtpe.org). Scholarship offers will be made by March 14, 2024.

**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. **Have you received training in DBT for adolescents (DBT-A)?**   Yes  No
   1. If yes, please describe your training in DBT-A:

Click here to enter text.

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

DBT individual therapy

DBT multi-family group skills training

DBT phone coaching (for teens)

DBT phone coaching (for parents)

DBT therapist consultation team

1. **How many adolescent clients do you currently provide DBT individual therapy to (i.e., are currently on your caseload)?** Click here to enter text.
2. **Approximately what percentage of your adolescent DBT clients need DBT PE?**

Click here to enter text.

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

Click here to enter text.

1. **What has your experience been in using DBT PE with your adolescent 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 adolescent 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 $187. You may request more or less than this amount depending on your need.)

Click here to enter text.