

Mental Health Oversight Advisory Council (MHOAC)
Application for Membership

NAME: _____

Address: _____ City _____

Telephone: _____ Email: _____

Applying to Represent: _____

* Note one primary designation from list below. Please circle the categories that apply to you, i.e., you are age 18-24, you are American Indian, etc.: *(circle all that apply)*

- | | | |
|---------------------------------|--|----------------------|
| * Youth (18-24) | * Consumer | * Family of Consumer |
| * Consumer Advocate | * Mental Health Provider | * American Indian |
| * Public at Large | * Parent of Child under 18 | * Provider Agency |
| * Service Area Authority Member | * Children's System of Care Member | * Legislator |
| * Veteran | * Substance Abuse Provider or Licensed Addiction Counselor | |

Please tell us why you would like to serve on the MHOAC.

What is your experience with persons with mental illness and/or mental illness and substance abuse (co-occurring) system in Montana?

Are you a member of your Mental Health Local Advisory Council? Yes ___ How often do you attend your community MH LAC _____ (Please provide MH LAC Chairperson Contact Information: Name and Email or Phone #). _____

No ___ I do not attend my community MH LAC. Please provide additional information below, if desired:

The MHOAC meets three-four times a year in Helena. Can you commit to attend these meetings?
YES _____ NO _____

Comments: _____

Please provide us with information on your Current Employment or Volunteer Involvement you have held that will support the Council's work.

Please provide us with information on your current associations with other advocacy groups in your community.

Additional Comments you would like to offer us:

Email applications are preferred (mdisburg-ross@mt.gov). If not able to email, please mail to:

Christine Bates, MHOAC Chair
c/o Mental Health Oversight Advisory Council Staff – Marlene Disburg-Ross
Mental Health Services Bureau
2121 Rosebud Drive, Suite F
Billings, MT 59102 or
Email: mdisburg-ross@mt.gov

Application Deadline: