

DBT Applicant Training Checklist- all the following must be submitted in one email to pro@yestohelp.org **Incomplete submissions will not be considered.**

_____ Completed Application

_____ Copy of current License as a Mental Health Professional in the State of Florida

_____ If not yet licensed, the name and phone number of your Clinical Supervisor and a letter from them stating that they are providing supervision and recommend you as an applicant for this training

_____ Photo (if you agree to YES posting your photo and bio on their social media pages)

_____ Biography 4-5 sentences (if you agree to YES posting your photo and bio on their social media pages)

_____ Signed YES DBT Training Contract