

Attachment 13 – Eligibility Certification

Please demonstrate that your organization, hosted, developed, and disseminated a multi-session, behavioral health specific, leadership training each year, in the last five years. Additionally, please demonstrate at least 400 SUD/Behavioral Health Managers completed the training over the five- year period. The curriculum must be targeted to the behavioral health workplace settings and must be a total of at least 20 hours per delivery. Deliveries must have been in both in-person and virtual formats to demonstrate your experience in both modalities.

Title of Training	Dates of Training	Number of SUD/ Behavioral Health Managers who completed the Training	Number of Hours of Training	Format: In-person, Virtual or Hybrid.

I attest that this information is true and all trainings noted above were targeted to behavioral health workplace settings.

Authorized Signature for your organization

Print Name _____ **Title** _____