

## South Carolina Department of Corrections DIVISION OF VICTIM SERVICES Critical Incident Stress Management (CISM) Peer Team Application



Last Name Employee#		First Name	MI	
		Cell Phone #	Work Phone #	
Instit	tution/Work Area:	Em	aployment date w/SCDC:	
Prese	ent Title/Position:	Pro	esent shift assignment:	
Pleas	se answer the following	questions:		
1.	Do you have a part time job or attend school after SCDC hours?   Yes   No If so, what is your normal schedule?			
2.	Do you have a home situation that would prevent you from responding to an immediate situation?  ☐ Yes ☐ No			
3.	Do you have access to transportation at all times? ☐ Yes ☐ No			
4.	How far do you live from your institution?			
5.	If security staff, have you been certified as a Correctional Officer by the SCDC Training Academy? $\Box$ Yes $\Box$ No			
6.	Have you completed your one-year probationary period? ☐ Yes ☐ No			
7. Why do you want to be a CISM Peer? (Use extra paper if nee			needed)	

## **CISM Requirements**

- Must have a minimum of 2 years correctional experience
- Must be disciplinary free for one year
- Must not have attendance issues (tardiness, absences, etc.)
- Must have excellent work ethics and working relationships with staff

Please read and initial:				
If selected, I am aware that, as a Peer, I will be on call				
If selected, I am aware that there is no compensation for being a Peer				
This form can be signed electronically and submitted to CISM using the SU print and fill out this form and email it to CISM using the email address below	<b>5</b>			
Applicant's Electronic Signature	Date			
Warden's Electronic Signature	Date			

Submit completed application to Division of Victim Services, CISM cism@doc.sc.gov

**SUBMIT**