

Dear Peer:

Unique Peerspectives is a peer support center for individuals who have had personal experience with the mental health system. We offer services and supports to promote an individual's recovery from mental health issues. The services that we offer are free to individuals that wish to work on their recovery at the center.

Enclosed please find our brochure explaining the mission of the center and the services provided. Also enclosed is a Referral Form which once completed by you will need to be returned to Unique Peerspectives, 466 South Salina Street, Syracuse, N.Y. 13202. Upon receiving your form, we will contact you to set up an appointment for an orientation. The orientation process takes about one-half hour where we discuss the services and supports that we offer at the center and discover how they may assist you and also give you a tour of the center.

Thank you for your interest in Unique Peerspectives. Hope to see you in the near future!

Sincerely,

Diane M. O'Brien
Program Director
Unique Peerspectives

**UNIQUE PEERSPECTIVES
REFERRAL FORM**

NAME: _____ PHONE NO. _____

ADDRESS: _____ DATE: _____

REFERRAL:
(Self or other than Self) _____ PHONE NO. _____

ADDRESS: _____

**UNIQUE PEERSPECTIVES IS A PROGRAM FOCUSED ON PROVIDING
SUPPORTS AND SERVICES TO PROMOTE AN INDIVIDUAL'S
RECOVERY. HOW DO YOU HOPE TO PURSUE YOUR OWN PERSONAL
RECOVERY IN ATTENDING THE PROGRAM AT THE CENTER?**

**PLEASE RETURN THE COMPLETED REFERRAL FORM TO UNIQUE
PEERSPECTIVES: 466 SOUTH SALINA STREET, SYRACUSE, NY 13202
OR FAX NO. (315) 475-1976
YOU WILL BE CONTACTED BY PHONE FOR AN APPOINTMENT.**

DATE RCVD: _____ RCVD BY: _____