



Sacramento County
Department of Health Services
Division of Behavioral Health Services
MENTAL HEALTH ASSISTANT APPLICATION

Agency: _____ Date: _____

Contact Person: _____ Phone: _____

I attest that I, _____, have the following education and experience required to qualify for the designated Mental Health Assistant category.

- MHA-III: An individual with at least four (4) years of full-time/equivalent (FTE) experience in a mental health related field providing direct mental health services. Two (2) years of education in a mental health related subject may be substituted for (2) years of work experience.* There is a minimum requirement of two (2) years of actual work experience.
MHA-II: An Individual who has at least two (2) years but less than four years of full-time/equivalent (FTE) experience in a mental health related field providing direct mental health services. There is no educational requirement.
MHA-I: An individual who has less than two (2) years of FTE experience in a mental health related field providing direct mental health services. There is no educational requirement.
MHW-MHTC: For Mental Health Treatment Center Staff Only. An Individual that is providing direct mental health related services to patients, which include identifying patients mental health needs, using community resources, and client advocacy.

Attached is a resume and college degree/transcript, if applicable, which qualifies me for this position.

*The education requirement must be a minimum of two (2) years of education (60 semester or 90 quarter units) with a minimum of 12 semester (18 quarter) units in a mental health related subject area such as child development, social work, human behavior, rehabilitation, psychology, or alcohol and drug counseling.

Applicant: _____ Signature _____ Date _____

Agency Representative: _____ Signature _____ Date _____

Quality Management: _____ Signature _____ Date _____