

Steve Sisolak  
Governor



Laura E. Freed  
Director

Colleen Murphy  
Deputy Director

Peter Long  
Administrator

**STATE OF NEVADA**  
**DEPARTMENT OF ADMINISTRATION**  
***Division of Human Resource Management***  
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**MEMORANDUM**

**HR#44-20**

July 6, 2020

**TO:** Agency Directors  
Deputy Directors  
Administrators

**FROM:** Peter Long, Administrator *Peter Long*  
Division of Human Resource Management

**SUBJECT:** PEER MENTOR PROGRAM ACKNOWLEDGMENT LETTER

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On March 20, 2019, Governor Sisolak signed Executive Order 2019-05 establishing a Peer Mentor Program for Veterans.

The Division of Human Resource Management (DHRM) is responsible for managing this program to support mentoring, professional development, and networking opportunities for veterans, members of the Nevada National Guard and members of the U.S. Armed Forces Reserves employed by the State of Nevada. Additionally, the Director of each state agency with veterans employed by the agency is required to identify at least one employee to serve as a peer mentor for other veteran employees and actively participate in the peer mentor program.

DHRM has developed the following acknowledgment letter that should be signed by peer mentors, supervisors, and Directors after being identified as a peer mentor for their agency. This letter outlines responsibilities of identified peer mentors and should be submitted to DHRM's Veterans Coordinator once completed.

Directors are also encouraged to designate a representative who will maintain communications with the Veterans Coordinator and provide notification when peer mentors are no longer employed or unable to fulfill their responsibilities.

If you have questions, please contact Doug Williams, Veterans Coordinator, at [dougwilliams@admin.nv.gov](mailto:dougwilliams@admin.nv.gov). Doug can also be reached at (702) 486-8838.

**PEER MENTOR  
ACKNOWLEDGMENT LETTER**

In 2019, Executive Order 2019-05 established a Peer Mentor Program for Veterans with the DHRM Veterans Coordinator being assigned to supervise this program. The Veterans Coordinator can be contacted at [dougwilliams@admin.nv.gov](mailto:dougwilliams@admin.nv.gov) or (702) 486-8838.

The Director of each State Agency with veterans employed by the agency is required to identify at least one employee to serve as a Peer Mentor and participate in the Peer Mentor Program. Large agencies are encouraged to identify additional Peer Mentors as deemed appropriate and prior military service is not a requirement to serve as a Peer Mentor.

Additionally, Directors or their designated representative should notify the Veterans Coordinator when an identified Peer Mentor is no longer employed by their agency or when they are unable to fulfill their responsibilities as outlined below. In accordance with NRS 284.589, state employees are allowed to receive administrative leave with pay when attending activities related directly or indirectly to the employee's job or employment with the State.

Peer Mentors' responsibilities will include but not be limited to the following:

1. **Attend the majority of program-related meetings.** At-large meetings for all state employees and program meetings specifically for Peer Mentors will be held quarterly and maximum participation is required.
2. **Complete online training or in-person training if available within 6 months of being identified.** Peer Mentors must be knowledgeable of veteran services and resources in Nevada. Online training is available through the Nevada Department of Veteran Services [Veteran Advocate Course](#).
3. **Be visible and accessible to veteran employees within their agency.** Peer Mentors should be proactively engaging with fellow employees and be available to assist new veteran employees through their onboarding process and transition to state service.
4. **Maintain communication with agency Directors.** Directors should be kept informed of program developments and any additional assigned duties.

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We acknowledge the requirement regarding the identification of Peer Mentors and their responsibilities once assigned to the program and will notify the Veterans Coordinator when an identified Peer Mentor is no longer able to fulfill their responsibilities.

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*Print Name (Peer Mentor)*

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*Signature & Date*

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*Print Name (Supervisor)*

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*Signature & Date*

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*Print Name (Director/Administrator)*

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*Signature & Date*