



***RCNI SEXUAL VIOLENCE
SPECIALISATION TRAINING FOR
COUNSELLORS & FRONT LINE
PROFESSIONALS.***

APPLICATION FORM

**Rape Crisis Midwest
Phoenix House,
Punch's Close,
Rosbrien Road
Limerick**

Tel: 061 311511

Email; michelle.walsh@rapecrisis.ie

www.rapecrisis.ie

Personal Details:

Name:

Address:

Mobile No:

Email address:

Date of Birth:

Counselling Qualifications:

Other Relevant Qualifications:

Accreditation Body & Status of Accreditation:

Would you prefer to a place on our weekend or midweek training.....

1. GIVE YOUR REASONS FOR WISHING TO PARTICIPATE IN THIS TRAINING

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2. IF YOU HAVE ANY EXPERIENCE OF THE FOLLOWING PLEASE GIVE DETAILS:

(a) WORKING WITH WOMEN'S / MENS / COMMUNITY / MENTAL HEALTH GROUPS/ YOUTH WORK, STUDENT WELFARE.

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(b) COUNSELLING (PLEASE GIVE DETAILS OF TRAINING RECEIVED)

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(c) WORKING WITH OTHER ORGANISATIONS (PLEASE STATE WHICH ORGANISATION AND THE NATURE OF YOUR INVOLVEMENT:

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3. WOULD YOU REGARD YOURSELF AS A FEMINIST? YES NO *(please tick)*

IF YES, HOW WOULD YOU OUTLINE YOUR FEMINISM?

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IF NO, PLEASE COMMENT ON THIS:

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4. WHY DO YOU THINK RAPE / SEXUAL VIOLENCE EXISTS?

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5. PLEASE GIVE A BRIEF PERSONAL HISTORY:

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6. HAVE YOU HAD PREVIOUS INVOLVEMENT WITH A RAPE CRISIS CENTRE?

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7. ARE THERE ANY COMMENTS YOU WOULD LIKE TO MAKE?

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PLEASE RETURN COMPLETED APPLICATION FORM TO:

**Dr. Michelle Walsh
RAPE CRISIS MIDWEST
PHOENIX HOUSE
PUNCH'S CLOSE
ROSBRIEN ROAD
LIMERICK.**

Tel: 061 311511 Email: michelle.walsh@rapecrisis.ie

CLOSING DATE FOR RECEIPT OF APPLICATIONS: 31st May, 2023.