**Enabling Women Leadership Program** Warrnambool, Port Fairy and the South West

# Participant Application Form

Women with Disabilities Victoria (WDV) is an organisation run for and by women and non-binary people with all kinds of disabilities.

Our members are people of all ages, backgrounds and lifestyles. We are a proud LGBTIQA+ ally. We strive to be a safe and inclusive service for all women and non-binary people.

We advocate for our right to safety and respect with a focus on empowerment and leadership.

The Enabling Women Leadership Program (the Program) is a community-based Program, where we explore leadership in fun and meaningful ways for women and non-binary people with disability.

The Program days and times will be confirmed when we know everyone's availability.

It will be delivered online via Zoom – but we will make it personal and fun. With lots of breaks.

We will be looking for up to 12 participants to do the Program. To end the Program on December 01 we will have a Graduation where friends and families can help us celebrate.

## This year the Program will be for women and non-binary people with disability in Port Fairy, Warrnambool and the State’s South West.

## Do you need help to fill out this form?

If you would like help to fill out this form, please contact Bridget Jolley on   
**(03) 9286 7813** or [bridget.jolley@wdv.org.au](mailto:bridget.jolley@wdv.org.au)

There is also an Easy Read version of this Application Form available on the Enabling Women page of [wdv.org.au](https://www.wdv.org.au/our-work/our-work-with-women/enabling-women-leadership-program/)

If you are using a computer to fill out this form, you can select the boxes by clicking or using the spacebar on the keyboard.

## Your details

|  |  |
| --- | --- |
| Information required | Your response |
| First name: |  |
| Family name: |  |
| Pronouns: *For example she/her or they/them* | **\*optional\*** |
| Postal address: |  |
| Suburb: |  |
| State: |  |
| Postcode: |  |
| Best contact number: |  |
| Email: |  |
| ****Do you identify as Aboriginal or Torres  Strait Islander?**** | **\*optional\*** |

## Questions about you

|  |  |
| --- | --- |
| Information required | Your response |
| 1. What are your passions and interests? |  |
| 2. Why are you interested in doing this program? |  |
| 3. a. Thinking about your gender and disability, what things may stop you from joining in activities in life? | Please explain more if comfortable: |
| b. Have you been able to overcome this? | Yes  No |
| c. If yes, what did you do? |  |
| 4. What connections do you have with Warrnambool, Port Fairy or the South West?Some examples may include where you live, work, study, volunteer, or being a member of a club, church, support group, or even a long-term customer at local shops |  |
| 5. a. What groups are you currently, or have you previously, been a part of? An example may be a Self-Advocacy Group. |  |
| b. What did you do as a member of these groups? |  |
| 6. How did you hear about the Enabling Women Program? |  |

**To participate in the Program online:**

|  |  |
| --- | --- |
| Requirement | Please tick |
| Do you have access to a computer with internet at home? | Yes  No |
| Is the internet connection reliable? | Yes  No  Sometimes |
| If you do not have a computer with home internet, would you be interested in having one provided to you for the Program? | Yes  Yes -with support |
| To enable you to participate in online meetings, does your computer include: | Microphone  Webcam  Speaker  Headphones |
| Have you done an online video meeting before? | Yes - Zoom  Yes - Teams  Other -please specify:  No |
| If no, would you be interested in being supported to use Zoom? | Yes  No |
| At times we may talk about confronting topics (like gendered violence).  a. Do you feel comfortable participating in the Program from your home? | Yes  No |
| b. Do you have a private place to participate in the Program at your home? | Yes  No |

## Are there any access requirements you may need to support you participating in the Program online?

|  |  |
| --- | --- |
| Requirement | Please tick |
| Attendant care |  |
| Note-taker |  |
| Interpreter |  |
| Information in alternative formats  Which formats: |  |
| Dietary requirements  Please advise: |  |
| Transport: |  |
| Other: |  |

## For more information on how we can support your participation please let us know.

### Supported by the Enabling Women Local Reference Group:



*Funded by the Australian Government Department of Social Services*