# LGBTQIA+ Pride flagAboriginal and Torres Strait Islander flagsWomen with Disabilities Victoria - Empowering WomenParticipant Application Form

***Victorian Enabling Women Leadership Program – 2024***

## About WDV

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 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.

## About the Enabling Women Program

The Enabling Women Leadership Program (the Program) is a community-based Program, where we explore leadership in fun and meaningful ways.

The Program will be delivered in a hybrid way. You can choose to attend in person at WDV’s office in Melbourne CBD, or online via Zoom.

There will be up to 12 participants.

There will be 8 weekly program sessions that will run for 3 hours each. Breaks will be included.

Program sessions will run on Wednesdays, with sessions starting April 24th.

Throughout the Program you will also work with a mentor, who will support you to achieve a leadership goal.

In June, we will have a Graduation event to celebrate your success of completing the program.

**The program is open to:**

* Women and non-binary people, who are
* Aged 18+,
* Lives, works, studies or plays in the state of Victoria, and
* Identifies as someone
* with disability (physical, sensory, intellectual, cognitive, etc.)
* who is Deaf / deaf / hard of hearing
* who lives with chronic illness, and/or pain
* who is neurodiverse, e.g. autistic, adhd, ocd, tic disorder
* who lives with mental health challenges.

## Completing the Application form

Application forms can be completed electronically, by hand, or by recording your answers in a video or audio recording.

There is also an Easy Read version of this Application Form. You can find it on [WDV’s website](https://www.wdv.org.au/our-work/our-work-with-women/enabling-women-leadership-program/)or call Bridget on **03 9286 7813** for a copy.

If you are using a computer to fill out the below form, you can check boxes with a mouse click or use the spacebar key on the keyboard.

Applications should be emailed to bridget.jolley@wdv.org.au.

If you are submitting a video or audio version, please email or call Bridget on **03 9286 7813** to discuss how to send the file.

## The letter I inside a circleHelp and More information

**Do you have questions or need help to fill out this form?**

If you would like more information, or help to fill out this form, please contact Bridget Jolley from WDV:

**Phone: (03) 9286 7813**

**Email:** bridget.jolley@wdv.org.au

### ****Applications close:****

**11:59pm, Thursday 11th April**

## Your details

|  |  |
| --- | --- |
| Information required | Your response |
| First name: |  |
| Family name: |  |
| \*Optional\* Pronouns:  *E.g. she/her or they/them* |  |
| Year of birth: |  |
| Postal address: |  |
| Suburb: |  |
| Postcode: |  |
| Best contact number: |  |
| Email:  |  |
| \*Optional\* ****Do you identify as Aboriginal and/or Torres Strait Islander?****  | [ ]  Yes – Aboriginal[ ]  Yes – Torres Strait Islander[ ]  No |
| ****Do you speak a language other than English at home?**** | [ ]  Yes – Aboriginal[ ]  Yes – Torres Strait Islander[ ]  No |

## 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, (or other areas of life) what things may stop you from joining in activities in life? |  |
| 3 b. Have you been able to overcome this? | ☐ Yes☐ No |
| 3 c. If yes, what did you do? |  |
| 4. What connections do you have with the state of Victoria?  | Some examples include where you live, work, study, volunteer, or visit. |
| 5. Do you currently, or have you previously participated in any WDV Programs / projects? What were they? | Some examples include a WDV hub, or previous Enabling Women Program. |
| 6 What groups are you currently, or have you previously been a part of? What do / did you do with the group?  | Some examples include peer groups, sporting club, Church groups, committees, etc. |
| 7. How did you hear about the Enabling Women Leadership Program? |  |

## Participation Questions

|  |  |
| --- | --- |
| Requirement  | Your Response  |
| 1. Do you have access to a computer or tablet, with internet at home? | [ ]  Yes – computer[ ]  Yes – tablet[ ]  No |
| 2. Is the internet connection reliable? | [ ]  Yes [ ]  No[ ]  Sometimes |
| 3. 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[ ]  No |
| 4. If you have a computer, does it include these things? | [ ]  Microphone[ ]  Webcam[ ]  Speaker[ ]  Headphones |
| 5. Have you done an online video meeting before? | [ ]  Yes - Zoom[ ]  Other – what did you use?[ ]  No |
| 6. Would you like any help to use Zoom? | [ ]  Yes – please tell us in what ways?[ ]  No[ ]  Not sure |
| At times we may talk about confronting topics (for example, gender based violence). 7 a. Do you feel comfortable participating online from your home? | [ ]  Yes [ ]  No [ ]  Not sure |
| 7 b. Do you have a private place to participate in the Program at your home? | [ ]  Yes [ ]  No[ ]  Not sure |
| 8. Starting time of the Program is yet to be decided. What time/s on Wednesdays are you available? | [ ]  10am – 1pm[ ]  1pm – 4pm |
| 9. Do you expect to participate mostly in person, or online? | [ ]  In person[ ]  Online[ ]  It depends / unsure |
| 10. Are there any Wednesdays between April 24th and June 8th, that you know you are unavailable for? |  |

## Support and access

|  |  |
| --- | --- |
| Requirement  | Your Response |
| Are there any access requirements, or supports that may help you to fully participate? | If you think you may need one of these supports, please tick the box and provide more information if requested. |
| Attendant care | [ ]  |
| Note-taker | [ ]  |
| Interpreter | [ ]  If yes, what language? |
| [ ] heelchair access | [ ]  |
| Dog guide / Service animal facilities | [ ]  If yes, what requirements? |
| Transport / accessing the venue | [ ]  If yes, what requirements? |
| Information in alternative formats | [ ]  If yes, what formats? |
| Dietary requirements | [ ]  If yes, what requirements? |
| Do you have any other access or participation requirements? | [ ]  If yes, what requirements? |

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