



## THE FIREBIRD TRAINING FOR WOMEN SURVIVORS OF INCEST/CHILD SEXUAL ABUSE

### Participant Form

Name:

Age:

Profession:

Email:

Ph/Mob:

Address:

1. How did you hear about the Firebird programme?
2. Why do you want to be a part of it?
3. What is the commitment you can make to this programme?
4. What, if anything, might come in the way of your commitment?
5. What do you have in place to help you keep your commitment?
6. What are the skills and networks you are bringing to this programme?
7. Have you been or are in therapy for your incest/CSA issues?
8. How far have you come in your journey of healing and recovery from incest/CSA?
9. How do you cope with difficult situations or stress?
10. What is your support network?
11. Are you under any psychiatric medication? If so, is it under the supervision of a psychiatrist?
12. Is the situation in which you are living secure and supportive?

13. Are you anticipating any major life changes or upheavals in the coming few months?

14. Any other information you may want to add:

Date.....

*Thank you for filling this form. The information you provide will be read only by the RAHI trainers.*