

**APPLICATION FORM**

**PSYCHOTHERAPIST**

**PART-TIME**

Name:

Address:

Telephone: Day: Evening:

Mobile: Email**:**

1.Why would you like to work at the Dublin Rape Crisis Centre?

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2.Please state your education and training background

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3(a) Please state your psychotherapy experience, including specific sexual violence work.

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## 3 (b) Group Work Experience

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4.Please list your qualifications

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| Year  From - To | Award | Awarding Body | Year of  Award |
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5.What qualities do you think you can bring to the Dublin Rape Crisis Centre?

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6 Do you have any experience of working with community/voluntary sector?

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7.What is your definition of rape?

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8.What is your definition of child sexual abuse?

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9.What is your experience of personal therapy?

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10. Are you accredited with:

IAHIP **Yes  No **

ICP (any modality) **Yes  No **

I.A.C.P. **Yes  No **

**Please give details, including date of accreditation**.

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11.Are you available to work early mornings or late evenings, and in Outreach services?

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12. Do you anticipate that you would need support in your own life as a result of your work in the Centre?

If so, where do you anticipate this coming from?

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13. How do you like to spend your free time?

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14. Is there anything you would like to add?

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Please give the names and addresses of three referees (with phone numbers) who can be contacted for both a written and verbal reference and please include a **Curriculum Vitae**.

**Referee 1:**

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**Referee 2:**

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**Referee 3:**

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Please return the completed form, with **current CV to:**

[**recruitment@rcc.ie**](mailto:recruitment@rcc.ie) **Subject line PSYCHOTHERAPIST PART-TIME**

**Closing date: 9th October 2020 @ 5pm**

**Expected dates of interviews: ( check)**