



## 2016 Safe & Together Model Advocacy Institute Application



### PERSONAL INFORMATION

LAST NAME:

FIRST NAME:

MAILING  
ADDRESS:

CITY:

STATE:

ZIP CODE:

EMAIL ADDRESS:

PHONE NUMBER:

DATE :

DOMESTIC  
VIOLENCE  
AGENCY:

POSITION TITLE:

YEARS IN  
POSITION:

Please cite any  
additional work/  
experience you  
have related to  
domestic violence  
and/or child  
welfare:

In addition to the application, applicants must include a letter of support from their agency's Executive Director/ CEO/ President.

Optional: Applicants may also submit a letter of support from their local child welfare agency. These applicants will be given special consideration.

Applications must be completed and submitted by May 6th, 2016 to [bridgetreilly@endingviolence.com](mailto:bridgetreilly@endingviolence.com)

Candidates will be notified of their selection no later than May 9, 2016 . Please submit questions to [bridgetreilly@endingviolence.com](mailto:bridgetreilly@endingviolence.com)

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**Please answer the following questions: (500 word limit)**

1. Why would you like to attend the Advocacy Institute? What would make you a good candidate?

2. Describe your experiences working with child welfare agencies as a domestic violence advocate. What has been your greatest challenge? What has been your greatest success?

3. How might a more collaborative relationship with child welfare agencies benefit the adult and child survivors you work with?

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