

# WOMEN'S LEADERSHIP DEVELOPMENT PROGRAM

## INFORMATION PACKAGE AND REGISTRATION

Thank you for your interest in becoming a Pathways into Womanhood Camp Leader. Demand for Pathways programs is growing rapidly and this is a great opportunity to join a high impact social venture. This training program will be exciting and experiential and is designed to tap into your individuality and creativity.

The major outcomes you will gain from attending this training:

- 1) You will have a significant personal experience that will allow you to look at the major priorities in your life and how you want to live and be in the future and this personal growth will create new possibilities for you as a leader.
- 2) You will be introduced to the Pathways programs and potentially have an opportunity to continue on and become a paid Pathways Leader

Please note that this training is specifically designed so that even if you have nothing further to do with the Pathways Foundations and its programs, you will still gain enormous value from the experience that will be of great assistance in many other areas of your life.

Our organisation is going through a strong growth phase as we move towards achieving our vision of creating a contemporary Rite of Passage that is available to every boy and girl in Australia. We are excited about training more leaders to take this program to many more communities around Australia.

Becoming a Pathways Camp Leader will enable you to provide a much needed service to your community. It is not a substitute for full time employment. Once you have completed your training the wage paid to you as a Camp Leader will support you to maintain your income whilst you're away from your other employment.

As we have limited places and need to assess all applications please ensure we receive your registration paperwork as soon as possible. Please read this document carefully and answer the questions in the application form if you wish to proceed.

Pathways is unique in the way that we approach facilitating Rites of Passage for girls in Australia. The girl and her mother or mentor attends a camp where the girls are challenged physically, mentally and emotionally. The girls have the opportunity to hear women's stories and ask questions.

Here she can be acknowledged and heard, her intrinsic qualities seen and appreciated and her future inspired by the stories of older women. This time has the potential to nurture and strengthen the mother-daughter bond, and facilitate an appreciation of difference amongst her peers, as she enters a time of great change.

Importantly the girls are outnumbered by grown women who are all working together for the benefit of the girls and are interested in their future. Results have been outstanding with excellent feedback from parents, teachers and the girls themselves as well as showing improved performance at school, decreased usage of drugs and alcohol, better family relationships and higher self esteem.

### **Testimonials from participants**

*...taking time out to be with each other at the Pathways program has strengthened and deepened my relationship with my daughter and myself. Respect & acceptance for each other as mother and daughter, women and individuals has predominantly increased since the program.....she is more solid in herself resulting in much needed raised self-esteem...she is more at peace and confident with where she is in her life..... Debbie Dunn (Mother)*

*I witnessed my daughter take small steps into her own authority, be more fully in herself (instead of hiding) and more confident in engaging with her world..... Tamsin (mother)*

*Jamilla has not watched the OC once, actually hardly any TV and is writing in her journal everyday, they certainly have been big changes that have been obvious, but I can tell she has had a real sense of who she is and where she fits in the world..... Debra (mother)*

*I urge you if something is missing, for you, if something eludes you in your life  
This 'Pathways into Womanhood' programme will show you, gift you with the very source of that  
longing..... Odile Lambert (mother)*

*As a mother and grandmother I learned so much about being female. I only wish I could have experienced this 40 years ago..... Kaye R*

### **From the young women**

*I feel this experience has benefited me in so many ways. I have so much more understanding about being a woman. It was sooo great to be able to express my feelings knowing I wasn't judged. The women and young women I was with are absolutely beautiful every single one. I couldn't have asked for anyone else..... Ashlea R*

**WOW !!!!**

*Thank you is not enough. All you leaders are amazing. Beautiful women and I can't thank you enough. I'll treasure the memories.....Young Woman 09 2007*

*I believe that in taking this journey, I have learnt so many lessons that I will carry with me forever, I will never forget the friendships I've made, challenges I've faced and lessons I've learnt.  
I will take this with me all my life.....Madelin Mclvor*

*During this outstanding program I learnt so much about everything there is to be known about becoming a young woman and bonding with some amazing girls. It was worth the whole world and I will take every little bit home with me! All in all a fantastic experience I will have my whole life.  
A big thanks to all the leaders and returning young women..... Zoe L. 14 years*

We welcome your interest and participation in this exciting Leadership Training that will enable you to be part of the teams that lead the 'Pathways into Womanhood' programs.

## About the training

To become a **Pathways** Camp Leader you will have to complete a two stage training process. Stage one is a four day residential camp. On this camp you will be trained by women who are leaders in the field of contemporary Rite of Passage work for girls in Australia, and you will:

### Be provided with opportunity for professional development

- Enhance your leadership and management skills
- Be guided through an experiential training process
- Be challenged to use your creativity and problem solving skills.
- Learn innovative techniques and form new links with other people who seek the same goals of a positive future for our youth.
- Overcome personal challenges in a supportive environment.
- Increase your personal capacity to facilitate groups.

### Learn about the 'Pathways to Womanhood' program

- Learn about the **Pathways** Foundation and its philosophy
- Learn practical skills required to run **Pathways** camps
- Be given a presentation on the **Pathways** business model and learn how you can start to run this work in your community and communities around Australia.

### Understand our training process.

- Be given clear direction of your development track through the Leadership levels
- Be provided with ongoing mentoring to support you in becoming an effective leader.
- Understand our accreditation process
- Be provided with an extensive resource booklet

### Learn about global responses to girls becoming young women

- Discover the commonalities of Rites of Passage around the world
- Hear first hand accounts of highly qualified people working in this field around Australia.

At the completion of **stage one** you will be assessed by the Leadership team to determine if you are suitable to progress to stage two of the training. At that point you may be invited to continue. If you are not invited to progress you will be given a full explanation as to why not and recommendations as to further personal development work you can do.

**Stage two** consists of being mentored and trained on three camps. A designated Senior Camp Leader will be allocated to take responsibility to train and mentor you on the camps. Over the duration of these three camps you will be given clear roles and responsibilities which will enable you to be assessed against predetermined criteria. It is envisaged that after three camps you will have had an opportunity to demonstrate the required competencies to move up to a Probationary Leader. Some trainees may not be ready at this stage and may have to attend more camps.

## What are the Leadership levels?

Training Officer  
Program Manager  
Module Leader  
Trainee Leader

### **If I've done this sort of work before - will I be recognised for this?**

We are working on a spiral model that allows women to be recognised for prior experience and to progress at a pace that is appropriate to their experience and skills. The entry point for these women is to attend stage one of the training and once into stage two they will be able to demonstrate their readiness to progress quickly through the Leadership levels and be recognised accordingly.

### **The development track**

All trainees will have a file that will clearly show where they are up to on the development track at the end of each camp. These files will be stored in the National Training Office and be available to the trainees upon request. All files will remain strictly confidential.

### **How much does it cost?**

Stage one of the training costs \$1900.00

Stage two of the training costs \$200.00 per camp (x 3 camps = \$600.00)

**Pathways has a pricing policy that supports you to attend the training.**

**If you require assistance, please contact**

**Leonie Deuis  
Pathways Foundation's National Training Office  
P.O Box 416  
Narooma NSW 2546**

**Ph: 1300 850 766 or Email [leonie@pathwaysfoundation.org.au](mailto:leonie@pathwaysfoundation.org.au) to find out more.**

# Women's Leadership Training Program

## Checklist and Payment Terms

### IMPORTANT INFORMATION for all Prospective Trainees

**CHECKLIST** (Please check that each of the following has been read, completed and returned.)

- |  |           |   |           |
|--|-----------|---|-----------|
| <input type="checkbox"/> Registration and Consent Form | (1 Page)  | <input type="checkbox"/> Asthma Form (if applicable)        | (1 Page)  |
| <input type="checkbox"/> Application Form              | (4 Pages) | <input type="checkbox"/> Working with Children Consent Form | (2 Pages) |
| <input type="checkbox"/> Medical Form                  | (1 Page)  | <input type="checkbox"/> Checklist and Payment Terms        | (1 Page)  |
| <input type="checkbox"/> Allergy Form (if applicable)  | (1 page)  | <input type="checkbox"/> Account Payment Options & Deposit  | (1 Page)  |

#### **Pathways Foundation Payment Terms and Refund Policy**

Please note that **Pathways Foundation** is a non-profit organisation. We often have waiting lists for our camps AND we find it very difficult to fill places at short notice. We incur a lot of overheads to run our camps and aim to keep costs for participants as low as possible. For this reason, we have the following payment terms and refund policy:

- 1 The cost of stage one of the Women's Leadership Training is \$1900
- 2 Full payment, part payment or a minimum camp deposit of \$500 must accompany this form to secure your position.
- 3 The \$500 camp deposit is NON REFUNDABLE, however should your application be unsuccessful then a full refund of your money will be made.
- 4 You are required to pay the balance of your camp fees 8 weeks prior to the commencement of the camp
- 5 If you cancel your booking 8 weeks or more prior to the commencement of the camp:
  - a. You may transfer your deposit and other paid camp fees to another scheduled camp.
  - b. You may ask for your deposit and other paid camp fees to be held until you nominate another camp to transfer your fees to. Your paid fees will be held for a maximum of 12 months from the time of cancellation, after which the fees will no longer be transferable and will be treated as a cancellation fee by Pathways Foundation.
  - c. You may ask, at the time of cancellation, for your paid camp fees other than your non-refundable deposit to be refunded.
- 6 If you cancel your booking less than 8 weeks prior to the commencement of the camp:
  - a. If the camp was at its maximum participant number for that site, Pathways Foundation will review its waiting list. If a replacement can be found the deposit and other paid camp fees will be treated as transferable.
  - b. If the camp had not reached its maximum participation number the deposit and any paid camp fees will be NON REFUNDABLE and treated as a cancellation fee as the camp will run incurring full food, personnel and site costs.
  - c. If there are extenuating circumstances leading to a cancellation within 8 weeks of the camp commencing, any deposit and camp fees MAY be treated as transferable on the approval of either the Operations Manager or National Women's Training Manager. Please provide Pathways Foundation with a written request detailing the circumstances of your cancellation.
- 7 These terms are current as at 17/7/07, refer [www.pathwaysfoundation.org.au](http://www.pathwaysfoundation.org.au) to ensure you have the latest registration form and terms.
- 8 We have a policy that no person should be prohibited from participating in this important program for financial reasons. "I require financial assistance to meet the costs and terms of the program. Please discuss payment plan and subsidy options with me". Yes / No

I have read and understood these payment terms and conditions.

**Signed (person who is responsible for paying)** ..... **Date:** .....

# Women's Leadership Training Program

## Registration and Consent Form

Training Program Location \_\_\_\_\_ Training Program Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

State \_\_\_\_\_

Postcode \_\_\_\_\_

Phone Mobile \_\_\_\_\_

Home \_\_\_\_\_

Work \_\_\_\_\_

Email \_\_\_\_\_

Occupation \_\_\_\_\_ Date of Birth \_\_\_\_\_

- I acknowledge that while **Pathways** and its staff will make every reasonable effort to minimise exposure to known risks, all hazards and dangers associated with these activities cannot be foreseen or may be beyond the control of **Pathways** and its staff.
- I hereby indemnify **Pathways** and its staff against any claim for accident or injury to me during the course of the program.
- I understand that my involvement in the **Pathways** Program may mean that I am remote from immediate medical help. I have provided **Pathways** with enough written information to deal appropriately with any medical conditions that I have.
- I further authorise **Pathways**, in the event of any injury or illness, and where it is not possible or reasonable to obtain my consent at the time, to engage a Medical Practitioner, Ambulance or hospital facilities. In this event I agree to pay all such emergency evacuation, Ambulance, Doctor, Nurse and /or hospital expenses.

I, \_\_\_\_\_, have read and completed all the information sent to me from the Pathways Foundation in relation to the training which will be held 26 February – 1 March 2009.

Signature \_\_\_\_\_ Date \_\_\_\_\_

# APPLICATION FORM

## Criteria for acceptance to attend Pathways training

### Essential criteria

1. Qualifications or experience working with girls, women or groups. (?????)
2. Actively engaged in personal development work
3. Demonstrated ability to communicate effectively
4. Demonstrated ability to function in a team environment
5. Willingness to undergo a 'Working with Children Employment Screening'
6. Sensitivity and acceptance of various beliefs and points of view

### Desirable criteria

1. Qualifications or experience in leadership, outdoor education, management or women's work
2. Accreditation in Certificate IV in Workplace Training and Assessment or Teaching Qualifications
3. Current Senior First Aid certificate
4. Experience in bush craft, camping, wilderness experience or community building

## **Essential criteria**

1. Please describe your personal development work
2. Ability to communicate effectively.
3. Experience working in a team environment.
4. Are you willing to undergo a Working With Children employment screening?
5. Sensitive to and acceptance of various beliefs and points

## **Desirable criteria**

1. Qualifications or experience working with girls, women or groups
2. Qualifications or experience in leadership, outdoor education, management or women's work
3. Accreditation in Certificate IV in Workplace Training and Assessment or Teaching Qualifications
4. Current Senior First Aid certificate
5. Experience in bush craft, camping, wilderness experience or community building

## General Questions

1. Please describe why you are interested in becoming a Pathways leader
2. How did you hear about the **Pathways** Foundation?
3. Camp Leaders are required to be smoke free on **Pathways** events. If you smoke, would you be prepared to not smoke during Pathways activities?
4. Do you have any children? If yes what are their names and how old are they?

Please provide contact details of two personal referees.

- 1.
- 2.

I understand that the costs for stage one of the training are non refundable and that on the completion of the residential training I will be assessed by the Leadership team with regards to my readiness and appropriateness to proceed to stage two of the training process. At that point I will either be invited to continue to stage two or be given a full explanation as to why not and recommendations as to further personal development work I can do.

Sign here..... Print name.....

**You must also fill in the Prohibited Employment Declaration and submit it with your application. You may email your application however you must post in your Prohibited Employment Declaration as it requires a signature before we can process it. Thank you.**

**Please return completed forms to the address shown below or you can fax or scan then email.**

Pathways Foundation Training Office

Attention: Leonie Deuis

P.O Box 416

Narooma NSW 2546

Fax: 02 8221 9474

email: [admin@pathwaysfoundation.org.au](mailto:admin@pathwaysfoundation.org.au)

**Name** \_\_\_\_\_

Pathways programs involve outdoor activities. **Do you have any medical condition that we need to be aware of or are you on any medication?** **Yes / No**

If YES please give details \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Name and number of person to be contacted in case of emergency** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Name of GP and contact information** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*The following information may prove useful in the event of a medical emergency or in determining a participant's fitness for a given activity.*

**Do you experience (please tick)**

- |  |  |  |                                   |
|--|--|--|-----------------------------------|
| Seizures <input type="checkbox"/>        | Heart condition <input type="checkbox"/> | Diabetes <input type="checkbox"/>                    | Migraine <input type="checkbox"/> |
| Dizzy spells <input type="checkbox"/>    | Sleep disorders <input type="checkbox"/> | Blackouts <input type="checkbox"/>                   | Epilepsy <input type="checkbox"/> |
| Travel sickness <input type="checkbox"/> | Disability <input type="checkbox"/>      | Recent or recurrent illness <input type="checkbox"/> |                                   |

**Is there any other information we need to know?** **YES / NO**

**If YES to any of the above please elaborate** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Do you have any dietary needs?**

\_\_\_\_\_

I hereby declare that the above information is true and correct.

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

Name \_\_\_\_\_

**Have you ever had an allergic reaction? Yes / No**

If yes, please complete below:

What may trigger an allergic reaction?

- Insect bites                       Plant pollens                       Plants                       Food groups or additives
- Penicillin                       Food                       Animals                       Detergents or cleaning agents
- Other drugs (please specify) .....
- Other allergies (please specify) .....

**What are the signs and symptoms of your reaction?** .....

.....

.....

**What is your Treatment Plan?** (please ensure you carry required medication with you at all times)

	<b>Medication</b>	<b>Dosage</b>
<b>Prevention</b>		
<b>Treatment during reaction</b>		
<b>Treatment after reaction</b>		

**Four vital questions**

- Is the reaction local or general?
- Have you ever been hospitalised due to an allergic reaction? Is the reaction life threatening?
- Do you have an anaphylactic reaction to your allergy?
- Is adrenaline administered when you have had an allergic reaction?

If yes please give details below

.....

.....

.....

**Is there any other information we need to know? Yes / No**

**Signed** ..... **Date:** .....

Name \_\_\_\_\_

**Do you have asthma? Yes / No**

If yes, please complete below.

*(This information is of vital importance in the event of an asthma attack, as it will assist in the speedy provision of correct treatment. Please complete accurately and with as much detail as possible).*

**What may trigger an asthma reaction?** (food, exercise, cold weather, pollen)

.....  
.....  
.....

**What are your usual symptoms?** (wheezing, coughing, tightness in chest, difficulty breathing, other)

.....  
.....  
.....

**Your Asthma Management Plan?** (please ensure you carry required medication with you at all times)

	<b>Medication</b>	<b>Dosage</b>	<b>How often?</b>
<b>Preventative</b>			
<b>Reliever</b>			
<b>Treatment during an attack</b>			

**Do you require asthma medication most weeks of the year?** Yes / No

**Have you been admitted to hospital due to asthma in the last 12 months?** Yes / No

**Do you suffer from sudden asthma attacks requiring hospitalisation?** Yes / No

**Is there any other information we need to know?** Yes / No

**Signed** ..... **Date:** .....

## Prohibited Employment Declaration

*The Commission for Children and Young People Act 1998 makes it an offence for a prohibited person (a person convicted of a serious sex offence, the murder of a child or a child-related personal violence offence, as well as a Registrable person under the Child Protection (Offenders Registration) Act 2000) to apply for or otherwise attempt to obtain, undertake or remain in, child-related employment. It does not apply if an order from the Industrial Relations Commission, Administrative Decisions Tribunal or Commission for Children and Young People, declares that the Act does not apply to a person in respect of a specific offence.*

For further information on what is child-related employment, see the *Working With Children Employers Guidelines* on [www.kids.nsw.gov.au](http://www.kids.nsw.gov.au).

Section 33B of the *Commission for Children and Young People Act 1998* defines a serious sex offence as:

- an offence involving sexual activity or acts of indecency committed in New South Wales and that was punishable by penal servitude or imprisonment for 12 months or more; or
- an offence involving sexual activity or acts of indecency committed elsewhere and that would have been an offence punishable by penal servitude or imprisonment for 12 months or more, if it had been committed in New South Wales; or
- an offence under section 80D or 80E (sexual servitude) of the *Crimes Act 1900*, committed against a child; or
- an offence under Sections 91D-91G (child prostitution, other than if committed by a child prostitute) of the *Crimes Act 1900* or a similar offence under a law other than a law of New South Wales; or
- an offence under Section 91H, 578B or 578C (2A) (child pornography) of the *Crimes Act 1900* or a similar offence under a law other than a law of New South Wales; or
- an offence of attempting, or of conspiracy or incitement, to commit an offence referred to in the preceding paragraphs; or
- any other offence, whether under the law of New South Wales or elsewhere, prescribed by the regulations.

**Note: A conviction for carnal knowledge is classified as a serious sex offence under this legislation.**

Section 33B of the *Commission for Children and Young People Act 1998* defines a child-related personal violence offence as an offence committed by an adult:

- involving intentionally wounding or causing grievous bodily harm to a child; or
- of attempting, or of conspiracy or incitement, to commit such an offence.

**Under *Commission for Children and Young People Act 1998*:**

- it is an offence for a Prohibited Person to **apply for, or otherwise attempt to obtain, undertake or remain in** child related employment;
- employers **must** ask existing employees, both **paid** and **unpaid**, and preferred applicants for child-related employment to declare if they are a Prohibited Person or not;

- all people in child-related employment **must** inform their employers if they are a Prohibited Person or remove themselves from child-related employment; and
- penalties are imposed for non compliance.

**I am aware that I am ineligible to apply for or otherwise attempt to obtain, undertake or remain in, child related employment if I have been convicted of a serious sex offence or child-related personal violence offence as defined in the *Commission for Children and Young People Act 1998*, or if I am a Registrable Person under the *Child Protection (Offenders Registration) Act 2000*.**

**I have read and understood the above information in relation to the *Commission for Children and Young People Act 1998*. I am aware that it is an offence to make a false statement on this form.**

**I consent to a check of my relevant criminal records, to verify the statements I have made here, being undertaken by the NSW Commission for Children and Young People for monitoring and auditing purposes in accordance with Section 36 (1) (f) of the *Commission for Children and Young People Act 1998*.**

**I declare that I am not a person prohibited by the Act from seeking, obtaining, undertaking or remaining in child related employment.**

**I understand that this information may be referred to the Commission for Children and Young People and/or to NSW Police for law enforcement purposes and for monitoring and auditing compliance with the procedures and standards for the Working With Children Check in accordance with Section 36 (1) (f) of the Commission for Children and Young People Act 1998.**

All fields must be completed. Please use block letters.

Name: \_\_\_\_\_

Aliases (previous/other names) \_\_\_\_\_

Date of Birth \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Contact Telephone Number \_\_\_\_\_

Contact Email: \_\_\_\_\_

Note: Seek legal advice if you are unsure of your status as a Prohibited Person.

**THIS FORM IS TO BE RETURNED TO PATHWAYS FOUNDATION**



