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**Restorative Practices**

**Training of Trainers** 2024

APPLICATION FORM

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**Please complete and sign this form and return it to George Best at CDI on** [**george@cdi.ie**](mailto:george@cdi.ie) **by**

**Wednesday the 25th of June 2024 (for July Courses)**

**Monday the 5th August 2024 (for August curse)**

**If you have any questions about this form or our Restorative Practices Training of Trainers Course call Claire on 087 280 6450 or George on 01 910 3075**

**Name:**

**Address:**

**Organisation:**

**Job Title/Role:**

**Phone:**

**Email:**

**Teaching Council Number (if applicable):**

**Course venue and dates that you are applying for:**

|  |  |
| --- | --- |
| **Dates and Venue** | **Yes?** |
| 9.30am-2.30pm July 1st to 5th & 10am-3pm, September 28th & November 9th 2024  [Childhood Development Initiative, Tallaght, D24 PK6P](https://www.google.com/maps/place/Childhood+Development+Initiative/@53.2920532,-6.3920063,17z/data=!3m1!4b1!4m6!3m5!1s0x486774b972f18ed7:0x7afaea05d40640e4!8m2!3d53.2920532!4d-6.3894314!16s%2Fg%2F1q5hrjbz4?authuser=0&entry=ttu) |  |
| 9.30am-2.30pm July 8th to 12th & 10am-3pm October 5th & November 16th 2024  [Mitchelstown Enterprise Centre, Co. Cork, P67 X660](https://www.google.com/maps/place/Mitchelstown+Enterprise+Centre/@52.2756614,-8.2741231,17z/data=!3m1!4b1!4m6!3m5!1s0x4843571a1611c4c1:0x7d16a8df50402e5f!8m2!3d52.2756614!4d-8.2715482!16s%2Fg%2F11gwmhm9q9?authuser=0&entry=ttu) |  |
| 9.30am-2.30pm August 12th to 16th & 10am-3pm October 19th & December 7th 2024  [Childhood Development Initiative, Tallaght, D24 PK6P](https://www.google.com/maps/place/Childhood+Development+Initiative/@53.2920532,-6.3920063,17z/data=!3m1!4b1!4m6!3m5!1s0x486774b972f18ed7:0x7afaea05d40640e4!8m2!3d53.2920532!4d-6.3894314!16s%2Fg%2F1q5hrjbz4?authuser=0&entry=ttu) |  |

1. **Please confirm that you have undertaken the following CDI Restorative Practices training (please put ‘Yes’ in each box that applies):**

|  |  |  |
| --- | --- | --- |
| **Course** | **Date (MM/YYYY)** | **Yes?** |
| Getting Started with Restorative Practices |  |  |
| Restorative Practices Facilitation Skills |  |  |
| Using Restorative Practices to Strengthen Positive Classroom and School Norms (RP Summer Course for Teachers) |  |  |

1. **Have you undertaken any other training in restorative practices to date?**
2. **Describe your experience of using restorative practices in your life and/or work.**
3. **What is your motivation for applying for this course?**
4. **Please provide any other information you believe is relevant to your application for this course.**

**Declaration:**

**Between September and December 2024, I will be in a position to deliver a minimum of eight hours RP Training to a group of trainees that I have already identified and which will be observed by a CDI Restorative Practices Quality Specialist.**

**I understand that being observed delivering CDI’s RP training is required to graduate this course.**

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**