

ROSE BROOKS CENTER Community Training Fee Waiver

Name: _____

Organization: _____

Job Title: _____

Please select one:

- Nature and Dynamics of Domestic Violence
- Safety Planning with Survivors of Domestic Violence
- Strangulation: The Unreported Trauma
- Trauma Work and Its Impact on You
- Making Services Accessible to Immigrant and Refugee Survivors of Limited English Proficiency (LEP): Policies, Procedures and Resources:
- In Her Shoes

Please share your reason for requesting a fee waiver:

I need continuing education credits for this training, circle one: Yes No

Please email this form to Kristy Baughman, at kristyb@rosebrooks.org