

# Enhancing Sexual Assault Services Initiative Application Form

The Oregon Coalition Against Domestic and Sexual Violence (OCADSV) is pleased to offer a new opportunity, Enhancing Sexual Assault Services Initiative (E-SASI). This 18-month initiative will provide up to six sexual and domestic violence (S/DV) programs across the state an opportunity to receive specialized support in enhancing sexual assault advocacy services. The E-SASI will utilize a four-pronged approach focused on building capacity within individual skills, organizational development, anti-oppression work, and trauma-informed practices.

The E-SASI requires participation from S/DV organizational leadership staff in addition to at least one other staff member. Selected programs should have a commitment to examining organizational policies and practices and a willingness to implement changes in order to better meet the diverse needs of all sexual assault survivors.

Participating organizations will receive training and support from OCADSV and national trainers throughout the 18-month period. Additionally, the initiative will provide opportunities to learn with and develop meaningful relationships with sibling organizations across the state through a cohort learning model.

This initiative is informed by the [Resource Sharing Project's Sexual Assault Demonstration Initiative \(SADI\)](#).

To read the full E-SASI announcement, [please click here](#).

**Questions:** Contact Meagan Schorr ([meagan@ocadsv.org](mailto:meagan@ocadsv.org) or 503.230.1951)

**IMPORTANT: Use the Adobe Reader app to fill out and save this form.**

Free download: <https://get.adobe.com/reader/>

## Let's get started

Organization/program

Your first and last name

Your job title

Your email address

Confirm your email address

Your daytime phone number

If this application is accepted, would you be the lead staff person on this project?

Yes

No

If you answered "No" to the previous question, please list the lead staff member's full name, job title, and contact information:

## Tell us about your organization

Brief overview of your organization, including mission, history, program areas, and the community you serve:

Please share your organization's philosophy about sexual violence and how it is prioritized:

Please provide a summary of the sexual assault services your organization currently provides:

Please share how your organization strives to meet the needs of survivors from marginalized communities:

What changes do you hope to see in your organization as a result of this project?

Please describe your organization's leadership commitment to this project and its goals:

Is your organization open to making systematic changes in order to better enhance capacity for sexual assault services?

Please explain:

Within your organization, do you have a staff member(s) leading sexual assault services?

Yes

No

If yes, please describe their job responsibilities:

If no, describe how sexual assault services are being delivered within your organizational structure:

*Be sure to attach a cover letter from your program's board and leadership indicating their commitment to this project.*

**Submit this application**

- By Mail: OCADSV, 9570 SW Barbur Blvd. Suite 214, Portland, OR 97219

*Mailed-in applications must be postmarked by February 19th, 2019.*

*Please also email [meagan@ocadsv.org](mailto:meagan@ocadsv.org) to let us know that your application is on the way.*

- Fax: (503) 230-1973