Expression of Interest Application for the
Suicide Prevention Lived Experience Speakers Bureau

Your Surname: ____________________________
Your First Name: __________________________
Today’s Date: ____________________________

INTRODUCTION
Thank you for your interest in Suicide Prevention Lived Experience Speakers Bureau. This is an exciting and motivational program that provides a voice to people with lived experience of suicide in their local community.

Before proceeding with this application it is imperative that you read the following four (4) documents. These documents provide information about the Speakers Bureau and very importantly, help you self-assess your readiness to undertake public speaking training. The goal of speaking about suicide publicly is to empower communities to know how to give help and to get help to prevent suicide.

- About the Suicide Prevention Lived Experience Speakers Bureau: A guide for anyone wanting to be a Speakers Bureau Community Champion
- Thinking about your personal readiness to be involved
- The Lived Experience Network Guide To Self Care
- The Lived Experience Network Talking About Suicide: A Guide To Language

You may also request to receive the above reading material by email (livedexp@suicidepreventionaust.org) or request to have a printed copy posted to you.

When is my application due?
Applications are accepted at any time throughout the year. If you are applying for a known training date, your application must be submitted at least 10 or more business days before the scheduled training date.
APPLICATION FORM

1. What is your full name?

2. What is your year of birth?  3. What suburb do you live in?


6. Current or past occupation(s) (paid and/or voluntary)

7. What is your email address?

8. What is the best daytime phone number for us to contact you on?

9. Is there another phone number we can call you on during the day? Please provide this number.

Do you identify as a member of any of these groups? (Mark all that apply to you)

- Aboriginal or Torres Strait Islander
- LGBTI: Lesbian, Gay, Bisexual, Transgender, and Intersex; or other diverse sexuality and gender
- CALD: Culturally and Linguistically Diverse
Expression of Interest Application for the 
Suicide Prevention Lived Experience Speakers Bureau

Please select all that apply to your lived experience of suicide:

<table>
<thead>
<tr>
<th>I have had suicidal thoughts</th>
</tr>
</thead>
<tbody>
<tr>
<td>I have survived a suicide attempt</td>
</tr>
<tr>
<td>I have cared for someone who has attempted suicide</td>
</tr>
<tr>
<td>I am bereaved by suicide</td>
</tr>
<tr>
<td>I have been touched by suicide in another way</td>
</tr>
</tbody>
</table>

Briefly describe your lived experience of suicide.

What do you want to achieve by becoming a speaker with the Suicide Prevention Lived Experience Speakers Bureau?
Expression of Interest Application for the
Suicide Prevention Lived Experience Speakers Bureau

Describe your personal care strategies.

16. Do you have public speaking experience?

| Yes | No |

If yes, briefly describe.

How did you hear about the Suicide Prevention Lived Experience Speakers Bureau?

| Twitter | Linkedin | Facebook | SPA E-Newsletter or email | Roses in the Ocean email | Other organisation’s communications | Word of mouth | Other (please specify): |

© 2014 Suicide Prevention Australia
Expression of Interest Application for the
Suicide Prevention Lived Experience Speakers Bureau

Please read each statement and indicate your agreement before submitting your application.

✓ I understand that by submitting the Expression of Interest Application for the Suicide Prevention Lived Experience Speakers Bureau I am not guaranteed a place in the program.

✓ I understand that the role of a Speaker in the Suicide Prevention Lived Experience Speakers Bureau is completely voluntary and no remuneration is available. I understand that reasonable out-of-pocket expenses will be reimbursed.

✓ I have read the document “About the Suicide Prevention Lived Experience Speakers Bureau

✓ I have read the Lived Experience Network “Thinking about your Personal Readiness To Be Involved”

✓ I have read the Lived Experience Network “Guide To Self Care”

✓ I have read the Lived Experience Network “Talking About Suicide: A Guide To Language”

WHAT HAPPENS ONCE YOU HAVE SUBMITTED YOUR APPLICATION
You will receive an acknowledgement email that your application has been received within 4 business days. A time will be arranged to speak with you by phone to explore the role in more depth and for both parties to ask questions. Numbers are strictly limited to 8 per training session.

WHEN WILL THERE BE A SPEAKER’S TRAINING SESSION IN YOUR AREA
The Suicide Prevention Lived Experience Speakers Bureau will host training sessions in different parts of Australia several times each year. Generally, funding is not available to cover the cost of travel and accommodation for trainees (though Suicide Prevention Australia and Roses in the Ocean will endeavour to secure funding). Training dates and locations will be shared through the SPA monthly E-Newsletter, Facebook, Twitter and through Roses in the Ocean.

HOW TO SUBMIT YOUR COMPLETED APPLICATION
Completed forms can be returned to SPA by email or post using the following contact details:

Email: livedexp@suicidepreventionaust.org
Mailing address: Suicide Prevention Australia – Lived Experience Speakers Bureau
GPO Box 219
Sydney NSW 2001

Contact Details:
Suicide Prevention Australia
P: 02 9223 3333
E: livedexp@suicidepreventionaust.org
W: www.suicidepreventionaust.org