

H.A.R.R.T. Application

Healthy And Responsible Relationships Troop



Legal Name: _____ Grade next year: 10 11 12

Nickname/Preferred Name: _____ Student ID: _____

Preferred Gender Pronoun: HE SHE THEY Other: _____

How did you hear about H.A.R.R.T.? I was referred by: _____

Teacher Recommendation Class Presentation Announcement Other: _____

Why do you want to join H.A.R.R.T.?

How comfortable are you exploring the topics of domestic violence and sexual assault?

How comfortable are you with public speaking? I love it! I'll do it if I have to It's terrifying!

Why is it important to prevent dating violence and promote healthy relationships at school?

What concerns, if any, do you have about learning or teaching others about relationship abuse?

What will you, as an individual, add to the H.A.R.R.T. group (skills, talents, personality, etc.)?

Is there anything else you want us to know about you?

Terms And Conditions

Must commit to following the collective agreements of H.A.R.R.T.:

- ★ Maintain Confidentiality
- ★ Actively Participate/ Be Present
- ★ Share The Room/ Step Up & Step Back
- ★ Demonstrate Respect For Others And Yourself
- ★ Be Willing To Be Challenged Out Of Your Comfort Zone
- ★ Leave Drama At The Door (or be prepared to address it in group)

Failure to honor the confidentiality agreement will result in termination from the program.

Breaking other group agreements will result in a verbal warning from the facilitators and encouragement from program participants to *stay accountable* to the group and each other.

Must be comfortable talking about controversial topics.

Must be comfortable with some public speaking.

You will be expected to practice and model healthy relationship skills and behaviors in all of your relationships and encourage others to do the same.

You must commit to the time and effort that this program requires (ranges from 2-6 hrs/wk)

Dating within the program is heavily frowned upon.

Must be prepared to miss a small amount of class throughout the year.

Must have a 2.0 GPA or higher.

Must have parent/guardian permission to participate.

By signing this document, I agree to the terms and conditions stated above.

Student Name (Print): _____ **Date:** _____

Student Signature: _____

