



THERAPIST APPLICATION

What is the Breaking Free Foundation?

Our mission is to provide survivors of traumatic life events with the treatment and support needed to reclaim their lives. Our goal with BFF is to make trauma healing accessible to everyone, regardless of economic status. Healing is possible, and the tools and resources to help should be available to everyone. We want to pave the road for trauma healing and create valuable conversations about mental health, trauma and abuse. Removing the stigma, starting the healing, one day at a time.

What is the Breaking Free Foundation Therapy Grant Program?

One of the main focuses of the Breaking Free Foundation is to help make trauma healing more accessible for everyone. One of the ways in which we are doing this, is through our therapy grant program, which allows approved candidates to receive designated therapy services, paid for via our foundation.

How this works is simple, interested applicants just fill out our Application for Therapy Grant, and either email or mail it to us. We review each applicant and assess their needs for trauma-based therapy. If the applicant is approved, we match them with one of our approved and screened trauma therapists. Our model differs from other free counselling services, because we pay the trauma therapist their regular fee, so we can ensure that we are providing our clients with the best possible quality of therapy. We also only work with therapists who are trauma trained and specialize in this type of work. We look for specific designations and certifications and screen all of our therapists thoroughly.

How do you apply?

Please fill out the attached form and send it back via email:

contact@breakingfreefoundation.ca

How do payments work?

Invoices will be paid monthly.

INVOICES sent to: accounting@breakingfreefoundation.ca

PART 1 – APPLICANT INFORMATION

*Mandatory fields must be completed by applicant

*1. Name of Therapist

*2. Full Address (*include street address, city/town, province/territory and postal code*)

*3. Telephone Number

4. Professional title

*5. Email Address

6. Website

*7. Governing body you are licensed with (and license number):

PART 2 – APPLICANT QUESTIONS

1. What is your therapy style?

2. Do you specialize in anything?

3. Do you have professional training in any trauma-specific areas/treatment types? If so, specify.

4. Do you see clients in-person, via Skype or both?

5. What is your rate for services? Do you have a sliding scale, do you do pro bono work?

What is your preferred client base?
Are there any types of clients you prefer not to work with?

7. Do you have any special requests?

General questions/comments.

There will be information about third-party release.

PART 4 – DECLARATION

- The information I have provided in this application is true, accurate, and complete in every respect.
- If the information described above is inaccurate, false or misleading, I may be released from being a designated therapist with the Breaking Free Foundation.

Applicant's Signature and Date

PRIVACY STATEMENT

The information you provide will be maintained in strict confidence.

FOR OFFICE USE

The above application as a designated therapist is:

Approved

Not Approved

Approved by:

Date:
