

HIGHGATE COUNSELLING CENTRE

58a Highgate High Street, London N6 5HX

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APPLICATION FORM DIPLOMA IN PSYCHODYNAMIC COUNSELLING

September 2020 - December 2022

A BACP Accredited Course

Name:	
Address:	
Postcode:	
Tel: (Home)	
Tel: (Mobile)	
Email:	

1. Employment

Please give your employers name, job title, dates and indicate whether this was paid or voluntary work:

Current Employment:

Previous Employment:

2. Qualifications

Please list your academic and professional qualifications, including dates and institutions:

3. Please list any counselling courses you have attended

In order to be eligible for the Diploma, you must have completed a period of study leading to the award of a Certificate in Counselling Skills. Please list dates, training institution(s) and outcome:

4. Current counselling experience

Please give details of any **current** counselling work and supervision arrangements (if any). Please indicate the nature of this work and whether it is in a voluntary or paid capacity:

5. Experience of previous therapy

Have you previously been in therapy? Yes / No

If yes, please indicate for how long: _____

What orientation? _____
(e.g. psychodynamic, integrative)

6. Medical History

Please indicate below any significant illness which has required medication or treatment during the last two years:

7. References

Please list below two referees. One should be someone who knows you in a work or training capacity. If you are currently on a counselling course, one of your referees must be either your tutor or seminar leader. Please indicate the nature of the relationship with the referee (e.g. manager, work colleague etc.). Please include an email address for them if possible.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

8. Supporting statement

Please attach a separate sheet highlighting:

- a) What has led you to make your application to join the diploma course now?
- b) What you would like us to know about your current personal situation?
- c) Please give an account of a significant experience in your life and how you dealt with it.

Please write no less than 500 words and no more than 1000 words. Please ensure your name is included on the statement.

please circle below how you heard about the course:

Friend/work

Counsellor/Therapist

Advertisement

HCC Website

BACP

HCC Contact

Other (please indicate the source below)

Course fees:

The fee for the course is £12,000.00. This can:

- (a) be paid up front by your employer;
- (b) be paid by yourself as a lump sum up front in advance of starting the training course;
- (c) you may choose to pay a place acceptance fee of £800.00 to secure your place on the course, followed by 28 monthly payments of £400.00 per month.
- (d) The breakdown of fees is as follows (excluding the place acceptance fee):
 - Year 1: £4800
 - Year 2: £4800
 - Year 3: £1600

Should you choose option (c) above, once you have paid the place acceptance fee, if you do not start the course, you remain liable for all of the remaining course fees. Should you later choose to terminate your training, or the Training Committee choose to terminate your training, again you remain liable for all of the remaining course fees.

I confirm that I have read and accept these conditions.

Signed: _____

Date: _____

Payment of fees:

If you are accepted onto the Diploma course, how will you pay for your fees?

Please tick one box as appropriate:

- up front by my employer on receipt of an invoice from Highgate Counselling Centre
- as a lump sum up front paid by myself in advance of starting the training course
- a £800.00 place acceptance fee and 28 monthly payments of £400.00 per month via standing order.

Standing orders are to be paid on the 18th of the month starting in September 2020 and ending in December 2022.

Next steps:

Applications should be submitted by 30 April 2020. Suitable candidates will be offered an interview once the application has been received, reviewed and processed. A registration and interview fee of £100.00 will apply.

A cheque to cover this amount should be made payable to Highgate Counselling Centre and enclosed with the application form and personal statement. Alternatively, you may wish to pay this fee via BACS:

BACS Details:

Highgate Counselling Centre
CAF Bank
A/C: 00018507
Sort Code: 40-52-40

Please use your surname as the reference.

Please forward your application to:

Kevin Hamilton
Training Manager
Highgate Counselling Centre
58a Highgate High Street
London N6 5HX

If you are not selected for interview, your cheque will be returned to you. If this has been processed or you have paid the registration and interview fee via BACS, you will be reimbursed.

Open Day

We will be holding an open day for both our Certificate and Diploma courses on Saturday, 14th March 2020. The Diploma presentation will take place from 2.00pm to 3.30pm at the Quakers Meeting House, Church Crescent, London N10 3NE.

Please note the following:

1. The selection process involves at least two interviews.
2. The decision reached by the Training Committee at Highgate Counselling Centre with regard to your application for a place on the course is final. Reasons for declining an application are not provided.
3. To reiterate, students who choose to pay a place acceptance but then do not start the course remain liable for all of the remaining course fees. Should you later choose to terminate your training, or the Training Committee choose to terminate your training, again you remain liable for all of the remaining course fees.
4. Students may not use participation on the programme itself as a qualification to counsel.
5. All information provided on this form is strictly confidential to Highgate Counselling Centre.

Please tick the relevant boxes below:

- I have read and accept these conditions
- I enclose a cheque for £100.00 made payable to Highgate Counselling Centre to cover the registration and interview fees
- I have paid £100.00 via BACS to cover the registration and interview fees (please provide reference details)

Signed: _____

Date: _____

Criminal Offences:

We ask that you make known details of any police cautions, reprimands, warnings or convictions that are likely to be disclosed via the request of an enhanced Disclosure and Barring Service (DBS) check.

Have you ever been cautioned, convicted or received a Police reprimand or warning?

Please tick box

Yes

No

If you have answered yes, please provide details and dates in the box below:

Signed: _____

Date: _____