

58a Highgate High Street, London N6 5HX

T: 020 8883 5427 E: kevin.hamilton@highgatecounselling.org.uk

W: www.highgatecounselling.org.uk

**APPLICATION FORM**

**CERTIFICATE IN COUNSELLING SKILLS**

**September 2022-June 2023**

PLEASE COMPLETE THE APPLICATION FORM IN WORD FORMAT

PLEASE HIGHLIGHT WHETHER YOU ARE APPLYING FOR A PLACE ON THE

**FACE TO FACE TRAINING ONLINE TRAINING**

Your Name:

Address:

Email:

Tel: Home

Tel: Mobile

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:

1. **PLEASE LIST ANY COUNSELLING COURSES YOU HAVE ATTENDED**

Please list dates, training institution(s) and outcome:

1. **PREVIOUS EXPERIENCE IN THE HELPING PROFESSIONS**

Please provide details of any experience you have in the helping professions. This could include one-to-one support work, telephone support work, group work, etc. (Note: previous experience in thie field is not essential).

1. **EXPERIENCE OF PREVIOUS THERAPY**

Have you previously been in therapy?

Please indicate Yes or No

If yes, please indicate for how long:

What orientation?

*(e.g. psychodynamic, integrative, CBT)*

1. **MEDICAL HISTORY**

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

1. **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 course manager. 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.

1. **SUPPORTING STATEMENT**

Please attach a separate sheet highlighting what has led you to apply for this course? Please write no more than 500 words and ensure your name is included on the statement.

**9. PLEASE INDICATE BELOW HOW YOU HEARD ABOUT THE COURSE:**

e.g., HCC website, BACP, friend, etc.

**10. COURSE FEE**

The fee for the course is £1,950.00. This can:

(a) be paid in full up front in advance of starting the training course.

(b) you may choose to pay a place acceptance fee of £550.00 to secure your place on the course, followed by 10 monthly payments of £140.00 per month from September 2022 to June 2023.

Should you choose option (b) 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:

(Typed signature is acceptable)

**PAYMENT OF FEES**

If you are accepted onto the Certificate course, how will you pay for your fees? Please highlight below as appropriate:

□ as a lump sum, paid in full up front, in advance of starting the training course.

□ a £550.00 place acceptance fee and 10 monthly payments of £140.00 per month via standing order.

Standing orders are to be paid on the 18th of the month starting in September 2022 and ending in June 2023.

**NEXT STEPS**

Applications should be submitted by 30th April 2022. Suitable candidates will be offered an interview once the application has been received, reviewed and processed. A registration and interview fee of £50.00 will apply.

When submitting your application form and supporting statement, please pay the registration and interview fee of £50.00 into the following account:

Highgate Counselling Centre

Barclays Bank plc

A/C: 53577538

Sort Code: 20-76-90

Please use your surname as the reference.

Please email (do not post) your application to:

Kevin Hamilton

Training Manager

Highgate Counselling Centre

kevin.hamilton@highgatecounselling.org.uk

If you are not selected for interview, your registration/interview fee will be reimbursed to you.

**OPEN DAY**

We will be holding an open day for our Certificate course on Saturday, 19th March 2022. This presentation will take place from 11.00am to 12.30pm and will be held on-line via Zoom. Please email Ruth Fitzgerald at Highgate Counselling Centre if you wish to attend:

ruth.fitzgerald@highgatecounselling.org.uk

**PLEASE NOTE THE FOLLOWING**

1. The selection process is via interview and your written application.
2. The decision reached by Highgate Counselling Centre with regards to your application for a place on the course is final. Reasons for declining an application are not provided.
3. Once you have paid the place acceptance fee, should you choose not to start the course, you remain liable for the remainder of the course fees. Should you later choose to terminate your training, or your training is terminated by Highgate Counselling Centre, again you remain liable for the remainder of the course fees.
4. Students may not use participation on the programme itself as a qualification to provide counselling.
5. All information provided on this form is strictly confidential to Highgate Counselling Centre.

Signing below indicates that:

□ You have read and accept these conditions.

□ You have paid £50.00 via BACS to cover the registration and interview fee.

Signed:

(Typed signature is acceptable).

Date:

**DISABILITY STATEMENT**

We are committed to equality of opportunity for people with disabilities. We recognise that some disabilities remain hidden but that it may be important for these to be known to us. Gov.uk says: *“You’re disabled under the Equality Act 2010 if you have a physical or mental impairment that has a ‘substantial’ and ‘long-term’ negative effect on your ability to do normal daily activities.”*

**Do you consider yourself to have a disability?**

Please indicate Yes or No

**Is there anything you would particularly like to tell us about your disability?**

**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 indicate Yes or No.

If Yes, please provide details below:

Your name in full:

In the event there continues to be Government restrictions in place in September 2022, the timetabled face-to-face training will be delivered via a remote platform until we are able to return to face-to-face training.