

Diploma in Counselling Children & Young People

Application Form: Year 1

	Personal Details
Title	
First name	
Surname	
Address	
Post Code	
Mobile Telephone	
E-mail address	
Emergency Contact Name	
Relation to you?	
Contact Number	

If you are disabled and/or require special facilities, or have any specific learning needs please briefly state your requirements. You may also request to speak to the Course Facilitator before you complete this form. (sue.lewis.temenos@gmail.com)

Entry Criteria

This course is for applicants who are either students on a Counselling & Psychotherapy Diploma course or qualified to Diploma level in counselling or psychotherapy. Please tell us below how you meet this entry criterion.

Applicants are required to have completed at least 100 hours of counselling practice. Please tell us how you meet this entry criterion.

Applicants, ideally, will have some experience of establishing appropriate relationships with Children and Young People in a professional context (paid or voluntary). Where this isn't the case, please discuss with the Course Facilitator.

Please tell us below how you meet this entry criterion.

This course is based on the philosophies & principles of the person-centred approach. Please tell us below about your experience of person-centred, student-centred and/or experiential learning.

Please use the space below to tell us:

1 Why you want to study on this Course?

2 Why now?

3 What you hope to achieve from attending?

If there is any specific or additional information you wish to be considered in conjunction with your application please explain below and include any relevant supporting documentation.

Referee

We require two References, one of which will be from your current supervisor, which clearly indicates that they support your application to train as a counsellor for Children & Young People.

We do not have a pro-forma and e-mail format is acceptable.

Please ask them to provide a reference and forward it to sue.lewis.temenos@gmail.com

Data Protection and Privacy

Information on this application form is treated as confidential within Temenos and is used for the purposes of Temenos admissions and administration.

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Date.....

Signature of applicant

Please return the form to: sue.lewis.temenos@gmail.com (email preferred)