

Application Form

Please attach your Curriculum Vitae

First Name: _____

Surname: _____

Address: _____

City: _____

Post Code: _____ Telephone: _____

Email address: _____

Course applied for:

Certificate in Adult Counselling

MA/Diploma Training

Conversion Course

Supervision Course

Have you previously trained in counselling or psychotherapy?

Yes

No

Details: _____

Did you have any personal therapy/counselling in the past?

Yes No

Please give dates:

From: _____ to: _____

Confidential

Have you have any previous convictions related to child offences?

Yes No

If yes please give details:

Name: _____

Sign: _____ Date: _____

References

Please provide details of two referees. At least one of them should know you in your professional capacity.

Terapia will contact your referees **after the interview**. All information given by the referees will be treated with strict confidentiality.

Name: _____

Address: _____

Postcode: _____ Telephone: _____

Position held: _____

Name: _____

Address: _____

Postcode: _____ Telephone: _____

Position held: _____

Terapia

Equal Opportunities Monitoring Form

Terapia is committed to promoting equal opportunities as a training organisation and as an employer. As part of your commitment to transparent, objective and fair procedures we ask all our applicants to fill in the Equal Opportunities Form. This form will be treated in strict confidence.

1. Gender:

Male Female

2. Age:

20 to 29 30 to 39 40 to 49 50 to 59

60 to 69 70 to +

3. Ethnicity:

Black British Black African

Black Caribbean Black other

Indian Bangladeshi

Pakistani Chinese

White British White European White other

Mixed race (please specify) Other:

4. Do you have a disability ?

No Yes (specify.....)

5. Please describe your sexual orientation:

Gay/Lesbian Bisexual Heterosexual

6. Religion or faith

My religion is.....

I am not religious

Thank you for completing this form.