

Application for Entry into

DIPLOMA OF ADULT PSYCHOTHERAPY PROGRAMME

SURNAME:

AGE:

OTHER NAMES:

D.O.B.

ADDRESS:

(Please indicate your preferred address and telephone number for communication.)

1. Residential:

Tel:

Fax:

Mobile

2. Professional:

Tel:

Fax:

Email:

WHAT POSITION (S) DO YOU CURRENTLY HOLD:

ARE YOU A MEMBER OF ANY PROFESSIONAL ASSOCIATIONS OR BODIES?
If so, please give details (length of time, etc)

ACADEMIC QUALIFICATIONS:

(Please state qualifications, year obtained and name of University /College or other teaching body).

SPECIALIST QUALIFICATIONS:

(Include Colleges, Societies, Boards, Fellowship, etc)

PROFESSIONAL PRACTICE:

How long have you practised as a psychotherapist/counsellor.

How many hours of psychotherapy do you do per week?

What percentage of this is your overall practice?

How many hours of supervision do you receive per week?

If you are a supervisor - how many people do you supervise?

- For how many hours?

PUBLICATIONS:

TRAINING AND EXPERIENCE IN PSYCHOTHERAPY:

Please list in chronological order indicating theoretical and clinical components.

Please indicate principle theoretical frame of reference

HAVE YOU HAD PERSONAL THERAPY? YES / NO

If YES, please state the following :

When? For how long? If discontinuous please state periods of time in therapy.

What model/s of therapy were you in?

ARE YOU CURRENTLY IN THERAPY? YES/NO

If YES, when did you start?

What model of therapy are you in? e.g. classical analytic, object relations, self psychology, supportive etc.

MAJOR PROFESSIONAL INFLUENCES:

PROFESSIONAL REFEREES:
(Your referee must not include your personal therapist.)

Please give the name, address and telephone number of three referees who will be contacted.

1.Ph
2. Ph.....
3.Ph.....

Are you currently registered?

Which State are you registered in?

Date registration expires?

Do you have professional indemnity insurance?
(This is compulsory, without which you will not be admitted to the course.)

Date insurance expires?

Signature Date

If there is insufficient space to answer any of the questions, please add extra pages as required. Please send an application-processing fee of \$325 with your application. (\$250 is refundable if you are not called for an interview.)