

Please attach a recent photograph here

The Academy: S.P.A.C.E.

Date Application Received

Decisions

Courses Application Form

*NB Please retain a copy of this form and all enclosures for your own records
All information provided in your application will be treated as confidential*

Personal Information

Family Name		Given Name	
Date of Birth		Telephone (landline)	
Address and Postcode		Telephone (mobile)	
		Any Special Learning Needs that we should be aware of to support your studies?	
email			

Course Applied for (tick):		Documents included in your application Please ensure your application is complete prior to submission <i>tick to confirm inclusion</i>			
Foundation		Personal Statement		Piece of written work	
Diploma		Fitness to Practice Declaration		Photo	
		Copies of Certificates Countersigned by a referee who has seen the originals		Diploma (only) Selection Fee £30 – cheque Made payable to The Academy: SPACE	
		Two References			

Qualifications (*post 16 only*) EXCEPT Counselling Skills training and qualifications (*see next section*)

Date	Qualification	Grade	Institution

Other relevant training, particularly counselling skills courses

NB it is very important to specify duration (number of hours) for counselling skills training. You may include in-house and informal training

Date	Title/Subject	Duration (hours)	Provider

Employment History

Please note: A complete record is expected - where there have been gaps in employment please indicate why (e.g. full-time parenting/care responsibilities). If you have had a period of short-term temporary posts it is acceptable to group these rather than itemise each one.

From	To	Employer	Position	Reason for leaving

The Academy: Sheffield Psychotherapy and Counselling Education

Reference One (preferably professional).

Give this to your referee and ensure that it is sent to The Academy

Name of Applicant	
Your Name	
Your Position/ Relationship to the applicant	
Contact details	
Length of time you have known the applicant	
<p>Training in the field of counselling is demanding in terms of time, commitment, personal emotional exploration and academic skills. As the applicant will be working with vulnerable people it is vital they are trustworthy, reliable, genuinely interested in people and able to show empathy towards those different from themselves. They also need to understand the commitment involved in the training and the work. The following headings are to assist you in writing your reference, but feel free to add additional comments, or only comment on what you feel able to, given your knowledge of the applicant.</p> <p>Please give this to the applicant to include with their application. If for any reason you prefer to send a reference direct to the Programme Director please address it to Gail Evans, The Academy: Sheffield Psychotherapy and Counselling Education, The Coach House, 1A Filey Street, Sheffield, S10 2FF, S.Yorks marked Addressee Only -CONFIDENTIAL</p>	
Please comment on the applicant's	
Suitability for counselling training (<i>personal qualities, ability to get on with others, ability to form a helping relationship, emotional stability and resilience, personal awareness</i>)	
Motivation and commitment for counselling training	
	PTO

Academic and organisational ability/skills	
Reliability and trustworthiness	
Do you know of any reason why the applicant should not undertake this training or work (inc. offences/convictions)?	
Anything else you would like to add?	

Thank you for your time and trouble in completing this reference. Please indicate whether we can contact you for clarification on any point, should the need arise.

I am willing to be contacted with regard to this Reference YES / NO

I am happy for the candidate to see this reference YES / NO

Your signature

Date

The Academy: Sheffield Psychotherapy and Counselling Education

Reference Two (personal or professional).

Give this to your referee and ensure it is sent to The Academy

Name of Applicant	
Your Name	
Your Position/ Relationship to the applicant	
Contact details	
Length of time you have known the applicant	
<p>Training in the field of counselling is demanding in terms of time, commitment, personal emotional exploration and academic skills. As the applicant will be working with vulnerable people it is vital they are trustworthy, reliable, genuinely interested in people and able to show empathy towards those different from themselves. They also need to understand the commitment involved in the training and the work. The following headings are to assist you in writing your reference, but feel free to add additional comments, or only comment on what you feel able to, given your knowledge of the applicant.</p> <p>Please give this to the applicant to include with their application. If for any reason you prefer to send a reference direct to the Programme Director please address it to Gail Evans, The Academy: Sheffield Psychotherapy and Counselling Education, The Coach House, 1A Filey Street, Sheffield S10 2FF, S.Yorks marked Addressee Only - CONFIDENTIAL</p>	
<p>Please comment on the applicant's</p>	
<p>Suitability for counselling training (<i>personal qualities, ability to get on with others, ability to form a helping relationship, emotional stability and resilience, personal awareness</i>)</p>	
<p>Motivation and commitment for counselling training</p>	PTO

Academic and organisational ability/skills	
Reliability and trustworthiness	
Do you know of any reason why the applicant should not undertake this training or work (inc. offences/convictions)?	
Anything else you would like to add?	

Thank you for your time and trouble in completing this reference. Please indicate whether we can contact you for clarification on any point, should the need arise.

I am willing to be contacted with regard to this Reference YES / NO

I am happy for the candidate to see this reference YES / NO

Your signature

Date

The Academy: Sheffield Psychotherapy and Counselling Education

Fitness to Practise Commitment and Declaration

Practitioners in counselling, psychotherapy, and related people-roles are entrusted with the emotional and psychological well-being of people who are vulnerable when they seek help. The practitioner carries, and/or is invested with by the help-seeker, a position of power and authority and thus influence over them. For this reason, emphasis is placed on the ethical obligations and principles of good practice to protect well-being (in line with the BACP Ethical Framework 2002). This includes *self-care*, in a profession which can impact significantly on a practitioner's own health and well-being. We require all students to become BACP members and undertake a CRB check.

Students on counselling and psychotherapy courses practice their skills on one another and offer their own life and emotional experiences as learning material. It is our responsibility as educators and representatives of the profession, to establish as far as is feasible that candidates and students are not likely to do harm - to fellow students, clients, colleagues, the reputation of the profession, the Academy and Sheffield Hallam University - or themselves to be harmed by the training process, which is emotionally and psychologically demanding.

The Academy reserves the right not to offer a place, and to prevent progression, temporarily or permanently, in the event that an applicant/student is deemed to be unable to meet the ethical and good practice obligations for any reason.

We ask that you

- a) Declare your current and recent fitness to undertake this training and role
- b) Commit to safe and ethical practice in accordance with the BACP Ethical Framework
- c) Agree to notify and discuss with a tutor or Course Leader any issues that may interfere with your capacity to work safely and ethically,

And to do this by completing the following questions and signing the declaration

Please note: disclosing a history of problems in well-being or behaviour does not necessarily preclude entry to training and practice - indeed it may be considered to be a strength, if reflection, productive learning and change has resulted. However, you are expected to discuss the potential impact on your strengths, limitations and capacity to undertake training and the role of listening helper, and to include this in your personal statement.

Do you have any condition which impairs your physical ability to sit for extended periods (up to an hour continuously)?	NO	YES - please give details in your personal statement
Have you received any mental health treatment within the last 3 years (e.g. for depression, anxiety, other mental health disorders)?	NO	YES - please give details in your personal statement
Do you suffer from any condition which causes depression; anxiety; panic attacks; mood swings; anger etc; severe pain; excessive drowsiness; inability to sit and to be <i>psychologically</i> present in a helping relationship?	NO	YES - please give details in your personal statement

Have you within the past three years suffered from alcohol or drug dependency or misuse?	NO	YES - please give details in your personal statement
Do you have any record of offences/criminal convictions? <i>(NB You should be aware that even spent convictions can bar you from placements with some employers)</i>	NO	YES - please give details in your personal statement
Have you ever received counselling, psychotherapy or any other form of psychological help?	NO	YES - please give details in your personal statement

Please tick the box by each statement to indicate you have read and understood.

I declare that to the best of my knowledge the answers given to the questions above are correct.

I declare that there are no known reasons why I should not undertake this training.

I am willing to undertake a CRB check prior to any placement activity.

I agree to join NCS (National Counselling Society) and/or BACP members at the earliest opportunity after enrolling

I agree to notify the Course Leader of any significant changes to my health or circumstances which may have an impact on my capacity to work safely and ethically.

I understand that the Course Director, in discussion with the teaching team, may temporarily suspend or terminate my participation in any course should circumstances arise which impair my ability to act safely and ethically*.

Signature:

Name
(print)

Date.....

*NB Subject to appropriate procedures and appeals processes