

Community Counselling

St Bartholomew's Centre,
9711
292b Barking Road
893700
London E6 3BA
www.communitycounselling.org.uk

Tel No. 0208 524

Mobile 07547

Email
info@communitycounselling.org.uk

Registered Charity No. 1049519

COUNSELLOR PLACEMENT APPLICATION

Please complete the enclosed form and return it to Rosie Williams at the above address. After this application has been considered, you may be asked to attend the Centre for an interview and assessment of your counselling skills.

If your application is successful, you will be required to make a commitment to give up to three hours per week to your counselling work for a minimum of two years. You are also required to have monthly one-to-one supervision in line with BACP requirements. BACP guidelines for supervision are 1½ hours per month or per 8 client hours, whichever comes first. The fee of £25.00 (1 hour / 50 minutes) or £35 (1½ hours / 75 minutes) is payable by the supervisee.

Counsellors in training are required to have started personal therapy and to be in personal therapy throughout their placement. We will need to see written confirmation of this.

We request your support in our fund raising events and attendance at our workshops.

Long breaks and sudden endings are to be avoided and you will be required to continue work with your client/clients for as long as is reasonable, for the client to achieve their counselling objective.

Name..... Gender

Date of Birth.....

Address..... Tel No.....

..... Mobile.....

..... Work No.....

E-mail Address.....

Where did you hear about us

Current counselling course Current year of Study

Name and address of current place of study

Are you employed/unemployed Occupation

Professional Qualifications (if any):

Schools, Colleges, Universities attended:

Examinations passed:

Work experience (Paid/Voluntary):

Your current occupation:

Any hobbies, interests or studies you have undertaken that might be relevant to counselling:

Counselling experience to date (one-to-one hours):

Courses (work or other):

Have you had personal therapy? We will need to have written confirmation of sessions to date from your personal therapist.

How many sessions to date?

How do you rate this experience?

Ethnic Origin (Please tick)

Caribbean/West Indies
English
Welsh
Scottish
British
Other European
Other

African
Irish
Asian/Indian
African/Asian
Asian/Pakistani
Other Asian

Languages spoken

Other counselling placements

Previous counselling hours

Please describe briefly any treatment or medication for psychiatric/psychological issues:

How do you feel about life at the moment?

What strengths do you have that you believe will help you in your work as a counsellor?

What areas do you need to improve?

Have you ever been found guilty of a criminal offence? If so, please give details.

We will need to see a recent DBS check.

What use do you intend to make of your training in counselling?

On which daytimes or evenings would you be available to volunteer with Community Counselling?

References.

Please obtain references from two people who have known you for at least two years, one of which should be from someone who has known you in a working capacity (paid or unpaid) and the other from a course tutor (past or present).

Please forward the enclosed reference request form to your referees and write their names, addresses, telephone numbers and in what capacity they know you in the space below.

Referee 1

Referee 2

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Signature..... Date.....

**Please return the completed application to: Rosie Williams (Manager)
Community Counselling
St Bartholomew's Centre
292b Barking Road
London E6 3BA**

or to: info@communitycounselling.org.uk