

Conscire College

Application Form

First Names

Surname

Address

Home Telephone Number

Postcode

Mobile Telephone Number

Date of Birth

Email

Age

Post-Secondary School Qualifications

Employment History

Previous Counselling/Psychotherapy Work Experience

Previous Counselling/Psychotherapy Training

Where did you hear about Conscire College?

Membership of Professional Organisations (where applicable)

Autobiographical Statement

Please supply on a separate sheet, a brief description of any experience you have had (whether through your employment or in voluntary work) which involved; interpersonal skills, building a helping relationship, using counselling skills, etc. Please also describe what in your personal background and future aspirations motivates you to undertake this course. Include any other information relevant to your application.

Emergency Information

In the event of an emergency who should be notified?

Name

Telephone

Availability

Personal Therapy (where applicable)

Details

Date From: Date To: Hours:

Physical or other disability or medical condition including any which might necessitate special arrangements or facilities.

Course Applying for:
(feel free to tick more than one option when unsure)

Certificate in Introduction to Counselling Skills

Certificate in Counselling Skills

Certificate in Counselling Studies

Diploma in Therapeutic Counselling

Continued Professional Development

Please send your completed application form and biographical details sheet to:
The Course Administrator, Unit 1A, Beacon Hill Industrial Estate, Botany Way, Purfleet, RM19 1SR