

CONFIDENTIAL

APPLICATION FORM

Please complete and return to:

Holly Cassidy, Administrator
The Manor House Centre for Psychotherapy and Counselling
80 East End Road, Finchley, London, N3 2SY

CONFIDENTIAL

Section 1 Personal Details

Name:
Block Capitals

Address: Post Code:
Block Capitals

Telephone Number: (day) (evening)

Mobile Telephone: Email Address:

Date of Birth: Date of Application:

If resident in the UK less than 5 years or if a non-EU citizen please also complete Section 5

Section 2

Please indicate for what you are applying:

- Certificate in Counselling Skills
- Diploma Course
- Supervision
- Short Course Programme
- Continuing Professional Development
- Individually Designed Courses

Section 3

Education & Training History (GCSE or equivalent, Degree, Professional Qualifications)

Previous Counselling Courses attended (if any)

Why do you wish to join this Course?

How did you hear about the MHCPC?

Please provide a 500 word personal statement

Section 4

All applicants are required to provide the names and addresses of two referees and the capacity in which they are known to you. Referees should have a professional qualification (e.g. medical practitioners, lawyers, ministers of religion, teachers, etc.,) who have known you longer than two years and can vouch for your suitability to embark on a professional training course working with vulnerable people.

NB Referees should not be family members.

Name:
Block Capitals
Occupation:
Block Capitals
Address:

.....
..... Post Code

Email address.....

In what capacity is this person known to you?
.....

Name:
Block Capitals
Occupation:
Block Capitals
Address:

.....
..... Post Code

Email address.....

In what capacity is this person known to you?
.....

Section 5

If resident in the UK less than five years and/or you are a non-EU citizen, please complete the following section:

- a. Country of Origin
- b. Do you have a visa? Yes/No
- c. If yes, please state type
- d. Expiry Date of Visa

Please enclose with this application a copy of any two of the following: (NB you may be asked to provide the original document at interview.)

- Passport No
- Birth certificate
- National Insurance No
- Driving Licence with photograph
- Bank statement or utility bill

All enrolment data is held by the MHCPC administration and will be treated confidentially and with sensitivity for the benefit of the applicant, the MHCPC and the Sternberg Centre. Information provided by and concerning applicants, students, staff and patients is held by the MHCPC in its original, electronic and other formats and is processed for the purposes of administration and for marketing and statistical purpose in accordance with relevant legislation, including the Data Protection Act 1998. It is a condition of the MHCPC at the Sternberg Centre that such data will be held and processed. The declaration below must be signed in order for this application to be processed. MHCPC is an equal opportunities institution.

STUDENT DECLARATION

I give my consent to the processing of my data by the MHCPC at the Sternberg Centre. I certify that the above information is correct. I understand that subsequent enrolment and registration are subject to current regulations.

Applicants for the Certificate in Counselling Skills and Diploma Course only:

- [] I enclose a recent passport photograph
- [] I enclose a non-refundable selection interview fee of £50.00. Cheques to be made payable to MHCPC or card payments can be made over the telephone to the Administrator if you leave a message on 020 8371 0180.

Signed:

Date: