



Please send completed forms & attachments to: rowan@rowan-consultancy.co.uk

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| COSCA Counselling Supervision Certificate |
| 19 th & 20 th February, 5 th & 6 th , 26 th & 27 th March 2022 |
| 9.30am - 4.00pm |
| |

Application and Payment Deadline – January 8th 2022

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| Applicant Name | |
| Date of Birth | |
| Address | |
| Mobile Number | |
| Email Address | |
| Organisation name (if applicable) | |
| Organisation Address | |
| Payment Method | <input type="checkbox"/> Online (using a card) <input type="checkbox"/> Cheque (This will be processed upon application acceptance) <input type="checkbox"/> Invoice (Please complete the boxes below). Payment will be processed following acceptance of your application onto the course. |
| Invoicing Email / PO number (if applicable) | |
| Name/email of manager or referral agent | |
| How did you hear about this course? | |
| Please attach the documents requested to your email and confirm by ticking in the box. | |
| 1. A copy of your Counselling Diploma or a Counselling Skills Certificate. This needs to have been completed at least two years before the start date of the Supervision training. If you are a Counselling Skills practitioner, include a letter from the organisation which is sponsoring you. Included | |

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| <p>2. Evidence that you are currently practising as a counselling skills user or a counsellor under supervision. This can be a letter from your organisation, your CV or a personal statement. NB: If you are a Counselling Skills practitioner you <u>must</u> be sponsored by your agency.</p> <p>Included</p> | |
| <p>3. If you have a Counselling Diploma, have you completed at least 100 hours of supervised counselling practice, post-qualification?</p> <p>If you are Counselling Skills practitioner have you completed at least 100 hours of counselling skills practice, post-qualification?</p> | |
| <p>4. Details of the plans you have for undertaking the Supervision Practice hours related to the course</p> | |
| <p>5. The completed Supervisor's Information Form</p> <p>Included</p> | |
| <p>6. Details of any special requirements</p> <p>(Please note: we are based on the second floor with no lift, only a staircase).</p> | |
| <p>I have read the "Course Information" available on the Rowan Consultancy website. I agree to the Booking Conditions as detailed overleaf:</p> | |
| Signed: | Date: |

NB: Please only send your application once all parts are complete, including your Supervisor Information form. We are unable to process incomplete applications.

For Office Use only

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Supervisor's Information Form for Rowan's COSCA Certificate in Counselling Supervision

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| Trainee's Name | |
|----------------|--|

The supervisor of the trainee should fill out this form.

Please submit the completed form to Rowan Consultancy with your application.

NB: If you change supervisor during this training, your new supervisor will need to complete this form and submit it to Rowan.

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| Supervisor's name | |
| Email | |
| What is your highest counselling qualification/accreditation and when did you gain it? | |
| How many years have you been practising as a counsellor/psychotherapist? | |
| Do you have a supervision qualification? If so, please let us know what it is. | |
| How many years have you been practising as a supervisor? | |