**APPLICATION FOR FOUNDATION TRAINING IN COUNSELLINGAND INTERPERSONAL SKILLS WITH *TRAINING CONNECTIONS***

 COURSE DATE: OCTOBER 2013

 PERSONAL DETAILS:

 FIRST NAME : TITLE:

 SURNAME:

 ADDRESS:

 POST CODE:

 HOME TEL: WORK TEL:

 MOBILE: DATE OF BIRTH:

 EMAIL

EDUCATION AND QUALIFICATIONS:

Please feel free to continue on a separate sheet of paper where necessary

UNIVERSITIES/COLLEGES

ATTENDED :

FROM: TO:

COURSES OF STUDY FOLLOWED :

COURSES STUDIED:

AWARDING BODY:

PLEASE INCLUDE ANY COURSE CURRENTLY BEEN UNDERTAKEN:

FURTHER INFORMATION:

Why do you want to undertake training in counselling and interpersonal skills?

What is your current professional background and occupation?

What experience have you had in the field of psychological therapies, Individual or group sessions, courses workshops education………?

Have you undergone psychiatric treatment or received medication for psychological disturbances? If yes how long ago, and please give a brief description of the circumstances leading to treatment?

Are you presently undergoing psychiatric treatment or receiving medication for psychological disturbances? If yes, we will require written permission from your Doctor for you to attend this course?

What caused you to choose the work you are doing and the subjects you studied?

Are you satisfied with your personal life?

What experience have you had in counselling and interpersonal skills?

Who are the people past and present, that you value the most?

Is it your intention to apply for a professional clinical training programme?

What reaction did you have to these questions?

How did you hear about us?

FINANCE DETAILS

In order to secure a place on the course you must supply a processing fee / deposit of  **€150** and be prepared to pay balance of **€500**  when accepting a place on course.

I have enclosed a cheque for processing made payable to **TRAINING CONNECTIONS, 27 SEATOWN PLACE, DUNDALK, COUNTY LOUTH**

I undertake to pay the course fees, total €650, should I be given a place on the course.

If for any reason this course does not go ahead, full reimbursement of deposit / processing fee will take place.

NAME SIGNATURE

DATE