



Supporting Young People to Take Charge of Their Mental Health

Certificate in Counselling Young People 2022/23

Application form

Name:

Address:

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Postcode:

Contact No:

Email Address:

All information will be held in strictest confidence and in line with Data Protection Legislation.

Counselling and/or Psychotherapy Qualifications and Dates:

Qualification and Level	Date completed

Number of counselling hours to date:

Experience of working with young people and settings:

If you would like a placement with No5, you will also need to complete a full placement application form. Please contact Martin Fox, our Clinical Lead, for this form – martin.fox@no5.org.uk

Payments of fees (please tick your preferred payment method).

Full Payment – Non-Placement candidates

I agree to pay a deposit of £300 (including £184 CPCAB registration fee) by 19th August 2022 and the remainder fee of £1,548 before commencement of the programme.

Full Payment – Placement candidates

I agree to pay a deposit of £300 (including £184 CPCAB registration fee) by 19th August 2022 and the remainder reduced fee of £1048) before commencement of the programme.

Full Payment – Placement candidates – Introductory completed

I agree to pay a deposit of £300 (including £184 CPCAB registration fee) by 19th August 2022 and the remainder reduced fee of £698) before commencement of the programme.

Instalment Payments – Non-Placement candidates

I agree to pay a deposit of £300 (inc. CPCAB registration) by 19th August 2022 and the remainder £1,548 in eight monthly instalments of £193.50 by standing order.

Instalment Payments – Placement candidates

I agree to pay a deposit of £300 (inc. CPCAB registration) by 19th August 2022 and the remainder £1048 in eight monthly instalments of £131 by standing order.

Instalment Payments – Placement candidates – Introductory completed

I agree to pay a deposit of £300 (inc. CPCAB registration) by 19th August 2022 and the remainder £698 in eight monthly instalments of £87.25 by standing order.

Refunds

All deposits are non-refundable. Should you need to withdraw from the programme for personal or health reasons; agreement may be reached regarding a refund dependent on circumstances presented.

Signature: _____

Date: _____

CPCAB Candidate Registration

Upon your successful entry onto the Certificate in Counselling Young People programme, No5 registers all candidates with the CPCAB. Please complete the following for your CPCAB registration.

Full name as it appears on your passport or driving licence: _____

Email address: _____

Date of birth: _____

Gender (using the codes M/F/Other): _____

Learning difficulty or disability status (using the following codes): _____

Code	Description
1	Has a learning difficulty and/or disability
2	Does <u>not</u> have a learning difficulty and/or disability
3	No information provided by candidate

Cultural origin (using the following codes): _____

Code	Cultural Origin
WB	White - British
WI	White - Irish
OW	Other White background
MC	Mixed - White and Black Caribbean (British or otherwise)
MB	Mixed - White and Black African (British or otherwise)
MA	Mixed - White and Asian (British or otherwise)
MO	Other mixed background (British or otherwise)
AI	Asian or Asian British - Indian
AP	Asian or Asian British - Pakistani
AB	Asian or Asian British - Bangladeshi
OA	Other Asian background (British or otherwise)
BC	Black or Black British - Caribbean
BA	Black or Black British - African
OB	Other Black background (British or otherwise)
CH	Chinese (British or otherwise)
OT	Other (British or otherwise)
NA	No Information Given

I give permission, that on my successful entry onto the Certificate in Counselling Young People programme, for my name, email address, date of birth, gender, learning difficulty/disability status and cultural origin to be shared with the CPCAB for the purposes of candidate registration

Signature: _____

Date: _____

Please return your completed form to us by email to training@no5.org.uk