4.4. Team members' documentation

4.4.1. Application Form

Name:
Preferred Pronouns:
Email address:
Phone number:
Emergency Contact number: Relationship:
How would you prefer to be contacted: Phone: ☐ Email: ☐ If phone, is it ok to leave a voice message from Confide? Yes ☐ No ☐
Are you a Qualified Counsellor ☐ Student Counsellor ☐
Professional Membership Details: Please give details of which professional counselling body you are a member of, the level of membership and membership number
Current Course Details *(for students working towards qualification)*

Present College/University	Name of Course	Date Stated

Name of Tutor: Phone number: Email:
Have you achieved your 'Fitness to Practice'? Yes ☐ No ☐ If yes, please submit your Fitness to Practice letter/certificate with the application form

Previous Counselling Qualifications/Training

Name of Course	Qualification	Date Attained

Employment History: (*please start with the most recent)*

Name of Employer	Job Role	Start Date	End Date

Experiences:

If you work for another placement, please provide their details, and when you see clients.

How many client hours, if any, have you accrued to date?
Please provide details, including setting, client group and duration of work.

Availability:

When would you be available to start counselling at Confide?

What days/times would you be available to see clients?

Which location would you prefer? Chichester ☐ Bognor Regis ☐

Are you trained & willing to work Online (Zoom) ☐ Telephone ☐

Supervision Requirements:

It is a requirement to have in-house supervision when counselling at Confide. Supervision is split into two groups, and each group will meet every other week, on Tuesday evening, from 18.30 to 21.00.

Please confirm you are available on Tuesday evenings Yes ☐ No ☐

Do you require additional 1:1 supervision as part of your course requirement?

Yes ☐ No ☐

What are your current supervision arrangements, if any?

CPD Events

Confide provides two free internal CPD events per year, which are usually held on Saturdays.

Please confirm that you understand and can commit to the supervision and CPD requirements

Yes ☐ No ☐

Personal Therapy

Have you attended personal therapy in the past Yes ☐ No ☐

Are you currently attending personal therapy as a requirement for your course? Yes ☐ No ☐

If yes, please state the number of personal therapy sessions required for your course per academic year:

If no, please state your reasons for not being in therapy or not attending therapy before:

Where did you hear about Confide?

Do you know anyone who works with or is in any way connected with Confide?

Yes ☐ No ☐

Why Confide Counselling?

Please let us know: the reasons you would like a placement at Confide Counselling, to include how you perceive the role of counsellor and any life experiences you had that may influence your role as a counsellor – *no more than 500 words*

References

Please give the names and contact details of two references, one of whom must be from your tutor or equivalent from your current course or professional contact.

Name: Address: Telephone: Email: Relationship:	Name: Address: Telephone: Email: Relationship:

Criminal record

Due to the nature of the volunteering role, you are required by the Rehabilitation of Offenders Act 1974 to declare all criminal convictions, including those which are spent. Please note that the disclosure of a conviction or caution may not prevent you from volunteering with us, but failure to disclose any conviction or caution will.

Have you ever been convicted of a criminal offence or been subject to a caution or bound over order?

No ☐ Yes ☐

If yes, please state the nature and date(s) of the offence(s)

Declaration:

I confirm that the information I have provided on this form is correct to the best of my knowledge, and I consent to my personal data being processed and kept for the purposes described below.

I understand that this role will require a DBS check.

Please sign below if you are happy for us to keep a record of this information in the understanding that it will not be divulged to a third party (anyone outside the Confide organisation), and that personal data given in this document will be stored in compliance with the recent Data Protection Regulations of May 2018.

Data supplied in this document will be stored in a secure digital format, will be password-protected, and will only be accessed by authorised personnel. You are not obliged to provide any of the information asked above; however, please be aware that if you do not supply certain pieces of data, we may not be able to contact you.

I certify that the information given above is a true and accurate record.

Signed:

Date:

Please email your application form to applications@confide-counselling.co.uk.

We will contact you in due course. Thank you.