## Counsellor Application form

**Date of completion of form ­­­­­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Face to Face Counselling is committed to the safeguarding of children, young people, and adults.**

**All offers of placement will be subject to successful DBS check & references**

**DO NOT SEND CVs OR COVERING LETTERS**

**ONLY THIS DOCUMENT IS USED TO CONSIDER EACH APPLICANT**

Please fill in all sections in **black ink or typescript** for photocopying purposes

**PERSONAL DETAILS** (BLOCK capitals please, if handwritten)

## Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Other Names: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Post Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone – Daytime: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Evening: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Which university/college have you received your Diploma/ Degree from/are you studying at?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you a qualified counsellor? \_\_\_\_\_\_\_\_\_ If so, when did you qualify? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### DECLARATION OF HEALTH

Do you have a health problem which is relevant to your application? YES / NO

If YES, please give details\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### EDUCATIONAL QUALIFICATIONS & TRAINING

Please include all **relevant** qualifications obtained and other courses attended, both past and present. Please start with the most recent first.

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| --- | --- | --- | --- |
| **Establishment** | **Course name /**  **Training attended** | **Dates attended** | **Qualification obtained**  **(if applicable)** |
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### PRESENT AND PREVIOUS OCCUPATIONS (including voluntary and paid employment)

### Start with the current/most recent and explain reasons for leaving previous posts and any significant gaps in your work history.

|  |  |  |  |
| --- | --- | --- | --- |
| **Organisation** | **Job Title / Role** | **From** | **To** |
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##### EXPERIENCE AND SKILLS

Using the Person Specification on our website, please explain how you meet **each** of our requirements by giving appropriate examples (these can be from any paid or voluntary role):

###### REHABILITATION OF OFFENDERS ACT 1974

Because of the nature of some aspects of the work which you may in due course undertake on behalf of FACE TO FACE COUNSELLING SERVICES, this position is exempt from the provision of Section 4 [ii] of the Rehabilitation of Offenders Act 1974, by virtue of the Rehabilitation of Offenders Act 1974 [Exemptions] Order 1975, and you are therefore not entitled to withhold information about convictions which for other purposes are ‘spent’ under the provisions of the Act and, in the event of appointment, any failure to disclose such convictions could result in the withdrawal of approval to work within FACE TO FACE COUNSELLING SERVICES.

Have you ever been convicted of a criminal offence, or are at present the subject of criminal charges? YES / NO

If YES, please give details\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**N.B. Sign hard copy (for posting) here.**

**REFERENCES** (BLOCK capitals please, if handwritten)

Please give the names and full contact details of two referees. One should be someone who has insight into your work as a counsellor ie your college/university tutor, line manager or possibly supervisor etc. The other should be someone who has known you for at least two years but is not a family member. If you are shortlisted we will normally seek to request references prior to interview.

|  |  |  |
| --- | --- | --- |
|  | **Referee 1** | **Referee 2** |
| **Name** |  |  |
| **Email address** |  |  |
| **Phone number** |  |  |
| **Address**  **(including postcode)** |  |  |
| **Job title** |  |  |
| **Relationship – in what capacity do they know you?** |  |  |

How did you hear about Face to Face? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I confirm that to the best of my knowledge the information given in this application is correct and true.

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Firstly sign** the hard copy **(on the line above) and post** to:

Face to Face Counselling Service

St Clements Church

Edge Lane

M21 9AE.

**Secondly** EMAIL your completed application form to: [info@facetofacecounselling.org.uk](mailto:info@facetofacecounselling.org.uk)

Please note “Volunteer Application” and your name in the subject header of your email so that it is easily identifiable.

Form updated April 2018