

Training Application Form



Let's Talk Well are committed to promoting equality and eliminating unlawful discrimination, and we are aiming to achieve diversity in the range of courses we offer and students we attract. You do not have to answer these questions, and we understand that some of this information is personal and sensitive in nature, so we've included an option 'prefer not to say'. However, gathering this data helps us to understand if we are involving different groups of people, and to make improvements if some groups are not represented.

Personal Details

Full name	<input type="text"/>			Ethnic Origins				
Alternative name	<input type="text"/>			Africa	<input type="checkbox"/>	Other mixed background	<input type="checkbox"/>	
Title/gender pronouns	<input type="text"/>	DOB	<input type="text"/>	Bangladeshi	<input type="checkbox"/>	Other White Background	<input type="checkbox"/>	
Address	<input type="text"/>			Black British	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	
Phone number	<input type="text"/>			Caribbean	<input type="checkbox"/>	Polish	<input type="checkbox"/>	
Email	<input type="text"/>			Chinese	<input type="checkbox"/>	Portuguese	<input type="checkbox"/>	
Nationality	<input type="text"/>			Gypsy	<input type="checkbox"/>	Russian	<input type="checkbox"/>	
Religion (or belief)	Buddhism	<input type="checkbox"/>	Judaism	<input type="checkbox"/>	Muslim	<input type="checkbox"/>	Indian	<input type="checkbox"/>
	Christianity	<input type="checkbox"/>	Sikhism	<input type="checkbox"/>	Hinduism	<input type="checkbox"/>	Not known	<input type="checkbox"/>
	No religion	<input type="checkbox"/>	Other (pls specify)	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>
Sexual Orientation	Bi-sexual	<input type="checkbox"/>	Heterosexual/straight	<input type="checkbox"/>	Gay man	<input type="checkbox"/>	Other Asian Background	<input type="checkbox"/>
	Gay woman	<input type="checkbox"/>	Other (specify if you wish)	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>	Other Black Background	<input type="checkbox"/>
Emergency Contact Details	Name	<input type="text"/>		Other Ethnic Group	<input type="checkbox"/>	White Irish	<input type="checkbox"/>	
	Email	<input type="text"/>		Professional membership body and registration number	<input type="text"/>			
	Phone	<input type="text"/>						
	Relationship to student	<input type="text"/>						

Employment

Job Title	<input type="text"/>
Employer	<input type="text"/>
Address	<input type="text"/>
Type of Work	<input type="text"/>

In partnership with



Qualifications (including any awaiting results) continue a separate sheet if necessary

Subject	Grade	Date	Where completed

Course You Would Like to Apply For

CPCAB Level 2 Counselling Skills Certificate

CPCAB Level 3 Counselling Studies Certificate

CPCAB Level 4 Therapeutic Counselling Adults and Children & Young People Diploma

CPCAB Level 4 (Weekend) Therapeutic Counselling Adults and Children & Young People Diploma

CPCAB Level 5 Counselling Children & Young People Diploma

CPCAB Level 5 Counselling Children & Young People Certificate

CPCAB Level 6 Counselling Children & Young People Diploma

Please briefly tell us why you would like to do the course and any challenges you may face

How/where did you hear about the course?

Additional Support / Reasonable Adjustments

At Let's Talk Well we support students who need additional support, learning difficulties or disabilities. Please complete the section below to identify any support you may require, this will help us arrange support for you. Please note, if you are aware of a support need and do not declare it, this may affect us being able to provide the necessary support for you at a later date.

Do you consider yourself to have a learning difficulty, disability or health problem that we should be aware of and/or that you need support for?

Yes

No

Prefer not to say

Do you look after, or give any help or support, to anyone else?

Yes

No

Prefer not to say

You need internet access and a computer or laptop for coursework, are any of these a concern?

Yes

No

Prefer not to say

If you've answered yes to any of the above, please provide more details and let us know what help you may need, or would like, from us:

Declaration and Data Protection

Fees

Applicants are invited to enrol by paying the enrolment deposit (which shall be fully non-refundable in all circumstances EXCEPT if the course does not run). The balance of course fees is payable as per the relevant schedule option stated on the offer. All course fees are non-refundable. We must be clear that by accepting a place on the course you become liable for payment of the full course fees and with this in mind, we ask you to sign an acknowledgement of liability for the full course fees.

Course Commencement

Let's Talk Well will make every effort to avoid altering course times, course commencement and conclusion dates. However, should any changes be necessary, you will be notified at the earliest opportunity. The course will run subject to demand and the formation of a viable class cohort, based on the enrolment of a minimum number of successful applicants. A full refund of course fees paid, including any deposit, will be given to all applicants in the event that a course does not proceed and at least 14 days notice (prior to the advertised course start date) will be given in the event of a course cancellation or postponement. Let's Talk Well cannot be held liable for any remedy, damages or compensation beyond this.

Data Protection

Let's Talk Well takes its responsibilities as a data controller very seriously and is wholly committed to only using the personal data we hold for legitimate educational purposes and to keep you informed, in accordance with the law. The Let's Talk Well privacy notice is intended to provide information about how we collect, process and store your personal data. It also explains how we might share your data with third parties and explains your rights in relation to how we use your data. Please read it carefully at www.letstalkwell.org.uk/policies/privacy.

I declare that the information I have provided is to the best of my knowledge correct.

If you include any details, which you know to be false, or if you withhold relevant information you may render yourself liable for disqualification from the course.

Signature

Date

NOTE – if you would like a placement at Let's Talk Well, please complete the additional Appendix

Please return the completed form(s) to: training@letstalkwell.org.uk

Appendix - Placement

You are welcome to find your own placement, in which case you do not need to complete this page.

Let's Talk Well offers short-term peripatetic counselling within Gloucestershire and you will be able to select your preferred area to work in from the list below, however, you may need to go into your second and third choice area depending on client demand. We divide the county up into various areas and you will be required to travel between schools/community venues within your chosen area:

- Cheltenham and Tewkesbury
- Gloucester
- Forest of Dean
- North Cotswolds
- South Cotswolds
- Stroud

You will manage your own diary making appointments, convenient to you and your client. You will be required to contact clients by text to arrange appointments or remind them of their appointment. You will also need to complete safeguarding paperwork and external referrals, supported by your Clinical Manager, so there will be an element of administration outside of the counselling sessions.

Entry Requirements

- Enhanced children, young people and vulnerable adult DBS check (this can be arranged if not already in place)
- Attend a face to face interview (can be ZOOM if you live outside of Gloucestershire)
- Attend a 2-3 day induction and provide 2 references
- All placement hours must be completed by 31 August in the academic year your course ends, if not you will be required to pay for your supervision

References

Please provide the names and addresses of two referees, one of which should be your tutor from your qualifying counselling course. We will not contact referees until after your interview.

Referee 1 Name

Job Title / Position

Capacity in which you know them

Telephone

Email

Address

Referee 2 Name

Job Title / Position

Capacity in which you know them

Telephone

Email

Address

Preferred Area Choice

Choice 1

Choice 2

Choice 3

Special Offer

Would you like to take advantage of the special offer to complete additional placement hours for a reduced course fee?

Yes

No

(Please note you will be asked to sign a separate agreement)