



COSCA Counselling Supervision Certificate
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March 28th & 29th, April 25th & 26th, May 30th & 31st 2020
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9.30am - 4.00pm

Rowan Consultancy, 4 Kinnoull St, Perth PH1 5EN

Booking and Payment Deadline – February 24th 2020

Applicant Name	
Date of Birth	
Address	
Mobile Number	
Email Address	
Organisation (if applicable)	
Organisation Address	
Payment Method	<input type="checkbox"/> Card (Details will be requested upon application acceptance) <input type="checkbox"/> Cheque (This will be processed upon application acceptance) <input type="checkbox"/> Invoice (Please complete the boxes below). Payment will be processed following acceptance of your application onto the course.
Invoicing Email / PO number if applicable	
Name/Email of manager or referral agent	
How did you hear about this course?	
Please provide the following information:	
1. A copy of your Counselling Diploma or a Counselling Skills Certificate. If you don't have a Diploma, include a letter from the organisation which is sponsoring you.	

2. Evidence that you are currently practising as a counselling skills user or a counsellor under supervision. This can be a letter from your organisation, your CV or a personal statement
3. Approximate number of supervised counselling or counselling skills hours delivered (min 100)
4. Number of years of experience post qualification practising as a counsellor or counselling skills user (min 2 years)
5. Details of the plans you have for undertaking the Supervision Practice hours related to the course
6. The completed Supervision Information Form
7. Details of any special requirements (Please note: we are based on the second floor with no lift, only a staircase).
I have read the "Course Information" available on the Rowan Consultancy website. I agree to the Booking Conditions as detailed overleaf:
Signed: _____
Date: _____

NB: Please only send your application once all parts are complete, including your Supervisor Information form. We are unable to process incomplete applications.

For Office Use only

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Booking Conditions:

1. Self-funded bookings made will only be accepted if accompanied by full payment – please include cheque or call the office to pay with credit or debit card.
2. Bookings funded by employers must include the correct details for invoicing on the booking form - including an email address plus any Purchase Order details that may be required.
3. Training is provisional on minimum numbers attending and we reserve the right to cancel if these numbers are not reached. In this case applicants can choose a full refund or transfer of fee to a future course.
4. Access: Rowan's training rooms are located on the second floor of an old building with no lift, only a staircase.
5. It is the applicant's responsibility to inform us in advance of any special requirements so that we can try to accommodate them.
6. The data supplied on this form is covered by Rowan's Privacy Policy which can be found on our website at <http://www.rowan-consultancy.co.uk/privacy-policy.htm>

Fees:

£650 + VAT (£780 including VAT)

Cancellation Policy:

- 90% Refund with more than 8 weeks' notice
- 50% Refund with 8 – 4 weeks' notice
- No refund with less than 4 weeks' notice

4 Kinnoull Street 01738 562005
Perth www.rowan-consultancy.co.uk
PH1 5EN rowan@rowan-consultancy.co.uk

Supervisor's Information Form for Rowan's COSCA Certificate in Counselling Supervision

Trainee's Name	
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The supervisor of the trainee should fill out this form.

Please submit the completed form to Rowan Consultancy with your application.

Supervisor's name	
Email	
When did you gain your highest counselling qualification/accreditation and what was it?	
How many years have you been practising as a counsellor/psychotherapist?	
Do you have a supervision qualification? If so, please let us know what it is.	
How many years have you been practising as a supervisor?	