Please send completed forms & attachments to: rowan@rowan-consultancy.co.uk



COSCA Counselling Supervision Certificate		
24 th & 25 th February, 23rd & 24 th March, 20th & 21st April 2024		
9.30am - 4.00pm		

Ар	plication and Payment Deadline – February 9th 2024
Applicant Name	
Date of Birth	
Address	
Mobile Number	
Email Address	
Organisation name (if applicable)	
Organisation Address	
Payment Method	Online (using a card)
	Cheque (This will be processed upon application acceptance)
	☐ 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 t	his course?
Please attach the document	ts requested to your email and confirm by ticking in the box.
at least two years	ounselling Diploma or a Counselling Skills Certificate. This needs to have been completed a before the start date of the Supervision training. selling Skills practitioner, include a letter from the organisation which is sponsoring you.
Included	

2.	Evidence that you are currently practising as a counselling skills user of	or a counsellor under supervision.
	This can be a letter from your organisation, your CV or a personal stat	
	NB: If you are a Counselling Skills practitioner you <u>must</u> be sponsored	by your agency.
	Included	
3.	If you have a Counselling Diploma, have you completed at least 100 hapractice, post-qualification?	ours of supervised counselling
	If you are Counselling Skills practitioner have you completed at least 1 practice, post-qualification?	LOO hours of counselling skills
4.	Details of the plans you have for undertaking the Supervision Practice	hours related to the course
5.	The completed Supervisor's Information Form	
	Included	
6.	Details of any special requirements	
	, , ,	
	(Please note: we are based on the second floor with no lift, only a stai	rcase).
	read the "Course Information" available on the Rowan Consultancy wellions as detailed overleaf:	osite. I agree to the Booking
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. If you are self-funding, when we offer you a place we will send you a website link to pay by card. You then have 7 days to pay the full fee to secure your place.
- 2. Our cancellation policy
 - a) If you withdraw from the course, refunds are given as follows, depending on how much notice you give us:
 - You receive a full refund of fees paid minus £50 administration fee if you give us more than 8 weeks' notice before the course start date
 - 50% Refund of fees paid when you give us 4 8 weeks' notice before the start date
 - No refund of fees paid when you give us less than 4 weeks' notice before the start date
 - b) 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.
- 3. Online training courses will use www.zoom.us, reliable and good quality free software. You will be able to see and interact with fellow participants throughout the sessions and split off into breakout rooms for skills practice and small group discussions. Rowan Consultancy cannot be held responsible or issue refunds for any difficulties with internet connection. Please ensure that you have:
 - adequate broadband connection
 - a laptop or desktop or tablet, since a phone is not sufficient
 - a webcam with microphone
 - a speaker or headset
- 4. It is the applicant's responsibility to inform us in advance of any special requirements so that we can try to accommodate them.
- 5. 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: £750 + VAT (£900 including VAT)

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

Trainee's Name	

The supervisor of the trainee should fill out this form.

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

NB: If you change supervisor during this training, your new supervisor will need to complete this form and submit it to Rowan.

Supervisor's name	
Email	
What is your highest counselling qualification/accreditation and when did you gain 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?	