Wessex Counselling & Psychotherapy

Training Application Form



Please type / write your responses on the form below (please continue on additional paper if required)

Name	Stage applied for: please mark one only	
Address	Foundation	
Postcode	Intensive Foundation Course	
Email	Counselling Diploma – internal applicant	
Phone number	Counselling Diploma – external applicant	
Mobile number	Psychodynamic Psychotherapy	
Date of Birth		

	family situation (sin	gic, partier, ciliaren,	dependents, etc).	
Any phy	vsical or emotional d	ifficulty which has ent	ailed treatment?	
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Previous and current experience of work, including voluntary work:		
A stilling and interests of the control of		
Activities and interests other than work:		
Other courses and training attended:		
Experience of counselling/therapy:		

Using 300 – 350 words, please set out the reasons you are applying for this course now:
Circumstances in your current situation which you would like us to know about?
Circumstances in your current situation which you would like us to know about:
Are you aware of any learning difficulty, i.e. dyslexia, or any other reason why you might
require additional support during the course? Please give details:
Please give an account of significant experiences in your life and how you feel about them?
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Name and address of two referees and your relation to them (referees will be approached at oudiscretion):		

Please send two copies of your application to us with your selection process fee of

Foundation £45.00
Diploma £75.00
Psychodynamic Psychotherapy £75.00

to the address below:

The Selection Committee Wessex Training Fairfield House King Street Frome BA11 1BH

Please mark the envelope CONFIDENTIAL. *All Courses, you may be required to send additional information at a later date. All information is confidential to the Selection Committee.*