



BRIDGE PASTORAL FOUNDATION  
 2 Gar Street, Winchester. Hampshire. SO23 8GQ  
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 Website: [www.bridgepastoral.org.uk](http://www.bridgepastoral.org.uk)

## APPLICATION FORM

### Professional Diploma in Psychotherapy & Counselling

Please Print in Black Pen		
Name		
Address		
Telephone Numbers	Home	
	Work	
	Mobile	
Email Address		
Date of Birth		
Relationship Status		
Please tell us where you heard about this course?		

**Please note:** There is no discrimination intended in the following questions and it is crucial that you answer the questions fully. Please use a separate sheet if necessary.

	Yes	No
Have you any physical, psychiatric or emotional conditions or any addictions for which you have undergone treatment during the last five years?		
Have you ever been diagnosed with a psychiatric condition?		
Are you taking any medication?		
Do you have any special needs that could affect your participation in the training?		
Is there any reason why regular attendance would be difficult?		
Do you have a criminal record?		
If you have answered Yes to any of the above please give details below. Use a separate sheet if necessary.		

The Association for Clinical Theological Training and Care Limited is a registered company in England and Wales (Company no. 737881) and trades as Bridge Pastoral Foundation. The Association for Clinical Theological Training and Care Limited is a registered charity no. 296816

### **EDUCATION AND TRAINING**

Please list all your principal courses whether relevant to counselling or not

Dates	Training Institution	Course Title	Qualifications Received

## **CAREER / WORK HISTORY**

Please list all working experiences, including voluntary, whether directly relevant to counselling or not. Please start with your current occupation:

Dates	Organisation / Employer	Nature of Work

## **PERSONAL EXPERIENCE**

On a separate sheet, please write 100 to 200 words per question

1. List any childhood / adolescent experiences which you consider particularly significant in your life.
2. What have you found particularly difficult in your life to date that you would be willing to talk about at an interview?
3. List any other life experiences that you consider relevant to this application, including any experience of personal therapy.
4. What personal qualities do you possess that you feel would make you an effective counsellor / psychotherapist?

## **MOTIVATION**

On a separate sheet, please write 300 - 500 words

Please give your reasons for considering professional training in counselling and psychotherapy

## **PERSONAL INTERESTS**

Please list your recreational and community interests

## REFEREES

Please give the names and contact details (**including email address** where possible) of two referees.

Your referees may not be anyone who is directly or indirectly related to you.

Name		
Address		
Telephone Numbers	Home	
	Mobile	
Email Address		
Name		
Address		
Telephone Numbers	Home	
	Mobile	
Email Address		

## PAYMENT

Non-refundable application fee of **£180.00**

Cheques payable to: Bridge Pastoral Foundation

BACs Payments to:

Sort code 30-19-14

A/C Number 03534573

Please reference BACs payments with your name and the words 'PCC Application'

**Applications to:** Psychotherapy and Counselling Course.

Bridge Pastoral Foundation. 2 Gar Street, Winchester. Hampshire SO23 8GQ

I enclose a cheque for £180.00	
I have made a BACs payment to the account below	

To the best of my knowledge, all details given in this application are true and correct.

Signed		Date	
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Date received	Response & date	Interview date	Response & Date