

Schema Therapy Workshops

International Certification Programme in Schema Therapy

Application for ADVANCED Certification Training Programme 2017

Name: (Title and full name for certificates): _____

Name you prefer to be called by: _____

Profession: _____ Date qualified: _____

Date: _____

Address: _____

Postcode: _____

Work e-mail address: _____

Personal e-mail address: _____

Choice of Workshop Venues

Please indicate the venue which you would like to attend the workshops (i.e. Manchester or London, or a mix):

	Manchester		London	
Workshop 1	6, 7, 8 March 2017	<input type="checkbox"/>	5, 6, 7 June 2017	<input type="checkbox"/>
Workshop 2	19, 20, 21 June 2017	<input type="checkbox"/>	4, 5, 6 Sept 2017	<input type="checkbox"/>
One-day Workshop	22 June 2017	<input type="checkbox"/>	7 Sept 2017	<input type="checkbox"/>

Procedure

- (1) Please complete this application form. Please note that there is a limited number of training places available on the Certification route and submission of this application does not guarantee a place.
Please be aware that priority will be given to applicants who currently have access to personality disordered clients, or clients with significant personality disorder features.
- (2) After screening, you will be told whether your application has been successful or not.
- (3) Payment procedures will then be implemented.

The cost of the Advanced Certification route is **£5,990** but please do not send any money at this stage. Also, we are very happy to organise payment by instalments.

Will you be self-funding? (please circle/annotate/delete): **YES** **NO**

If you are not self-funding please provide invoicing details below. Please note that your organisation will not be contacted until your application for training is successful:

Full name of Trust /Organisation: _____

Purchase Order Number (if applicable): _____

Name of the person authorising payment: _____

Name of person/department we should send the invoice to: _____

Postcode _____

Tel no: (if known) _____ E-mail: (if known): _____

PTO

	<p>Continued</p> <p>Please give specific details of the following:</p>
1	Access to personality disordered clients, or clients with significant PD features. Access to clients who are appropriate for schema mode work due to complication, chronicity, failure to respond to treatment or relapse.
2	The length of time you would be able to work with your personality disordered clients and other clients as part of the certification programme? It is essential that you are able to provide longer-term treatments to clients (minimum of 12 months)
3	Any schema therapy training and/or supervision you have already received (if any).
4	The Certification Programme process requires that your supervisor and external rater(s) have access to recorded sessions with your clients. Is this acceptable, and has it been agreed by your workplace/employer? This is an essential element of training!
5	Academic training: You must hold at least a bachelor's degree.
6	<p>Accreditation for clinical practice: you must be accredited with one of the following regulatory bodies, allowing you to provide one-to-one individual therapy:</p> <ol style="list-style-type: none"> 1. BABCP (Full accreditation is required) 2. BACP (at least individual counsellor/psychotherapist accreditation is required) 3. Psychologists do not need to belong to the BABCP or BACP but must be eligible for chartered membership of the BPS and must belong to the HCPC. <p>Applicants not holding accredited membership to one of the above bodies may still be eligible to join an ISST-approved training programme if they hold a core qualification in mental health. Please see the website for more details.</p> <p>Please give all details including dates and membership numbers.</p>
7	Your current work as a mental health professional and how schema therapy might be useful. Please limit this to about 150 words.
8	Anything else that you wish to include here.

Please return this form to either the mail address or e-mail address below:

Either to: Schema Therapy Workshops, 3 Cork Drive, Pontprennau, Cardiff, CF23 8PU

Or to: info@schematherapyworkshops.com Or info@schematherapytraininguk.com

Websites: www.schematherapyworkshops.com / www.schematherapytraininguk.com