



BACHELOR OF ARTS (Hons) in Holistic Counselling and Psychotherapy
1-year add-on, part-time, 60 credits, QQI validated (NFQ Level 8)

APPLICATION FORM
(ACADEMIC YEAR 2022-2023)

PERSONAL DETAILS

Name (for Registration):
in block capitals _____

Address _____

Date of Birth: _____

Nationality: _____

Tel - Home: _____

Tel - Mobile: _____

Email: _____

Current
Employment:

Where did you hear
about this course?

Internet Search

Newspaper

Recommendation

IACP

ICPPD Learner/Graduate

Facebook

Other (please give details)

Preferred Location:

Athlone

Galway

Dublin

***NOTE:** ICPPD will use the information provided on this application form for the sole purpose of programme-related admission, administration and communication. Information provided will be held securely in accordance with ICPPD's data protection policy – for further information see ICPPD's [Quality Assurance Manual](#) .

REASON FOR APPLYING A PLACE ON THIS PROGRAMME:

Please include with your application a statement in approximately 500 words outlining your reason for applying for this programme.



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EDUCATIONAL BACKGROUND

Primary Qualification in Counselling and Psychotherapy, i.e., Level 7, professional diploma or equivalent qualification. Documentary evidence e.g. (copy of certificate) **MUST** be provided with this application. In some circumstances, ICPPD may require the original certificates for verification. These would be copied and returned to the applicant.

Letter from Accredited Personal Therapist to confirm 50 hours of Personal Therapy completed

YES

Letter from Accredited Supervisor to confirm 100 hours of Client Work completed

YES

Additional Third Level Education (including adult educational classes, courses etc):

Documentary evidence e.g. (copy of certificate(s)). In some circumstances, ICPPD may require the original certificates for verification. These would be copied and returned to the applicant.

Details of any other Courses which you think may be relevant to your application:

Documentary evidence e.g. (copy of certificate(s)). In some circumstances, ICPPD may require the original certificates for verification. These would be copied and returned to the applicant.

Other Achievements which you think may be relevant to your application:



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Please supply the names and addresses of two personal referees who would support your competence to undertake a level 8-degree course in Holistic Counselling and Psychotherapy:

1.

2.

_____	_____
_____	_____
_____	_____
_____	_____

Please identify your skill levels for the following i.e., are they sufficient to complete this degree programme:

I have sufficient IT skills to undertake this programme and own a computer with internet access.

I have proficiency in the English language (i.e., a pass in Leaving Certificate English, or equivalent) to undertake this degree programme and complete assignments.

Where the applicant's first language is not English, evidence of English language proficiency will be required e.g., successful completion of a course through English in the previous two years or English Language Proficiency Test (IELTS) with a minimum score of 6.5. Documentary evidence [copy of certificate(s), transcripts etc] should be provided with this application.

FITNESS TO PRACTICE – UNDERTAKING CLINICAL WORK

Please Note: ICPPD is responsible for ensuring learners' ongoing **Fitness to Practice** (in terms of health, behaviour and character), therefore progression is at the discretion of the College.

Is there any reason that might prevent you from, and/or hinder your progression in, undertaking this degree course in Holistic Counselling and Psychotherapy?

Yes

No

Please give details as appropriate:

.....

.....

I have read the programme details and I understand that I will be required to meet the academic standards as set out in this QQI validated programme.

In applying and accepting a place on this programme, I agree to personal and professional requirements in line with your professional body and ICPPD policies as laid out in the [Quality Assurance Manual](#).

I understand that this programme is an adult training course. As such, participants will be expected to demonstrate a sufficient level of maturity to take responsibility for themselves and their own involvement in the course.



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I certify that the information provided on this application is accurate. I understand that withholding information or giving false information may result in a refusal of a place within ICPPD or in termination of my application/registration at ICPPD.

I am required to provide evidence of current National Garda Vetting as part of the admission to the programme and prior to commencement of Clinical Practice.

I am required to provide evidence of professional insurance to undertake the clinical element of the programme.

Applicant Signature _____ **Date** _____

OFFICE USE ONLY	
Staff Signature/Initials: _____	Learner ID No allocated: _____
Application Form Received (Date): _____	Supporting Documentation Received: _____
Deposit Received: _____	Interview Date: _____

ADDITIONAL INFORMATION FROM ICPPD

COURSE FEES (as of 1st February 2022) are as follows: €4,250.00

An additional QQI Certification Fee of €200 also applies to the programme.

Fees may increase in line with changes in the Consumer Price Index.

NOTE: ADDITIONAL COURSE COSTS

These course fees do not cover the fees for mandatory associated activities i.e., the fees for personal therapy, external supervision or the residential retreat weekend are not included in the quoted fees.

Application: Applicants are invited to complete and return this application form with all relevant supporting documentation. Applications must be accompanied by a **non-refundable application processing fee of €100**. Applicants are entitled to a full refund of this fee if they decide to cancel their application 2 working days prior to their scheduled interview date.

Interviews: Admission interviews will be arranged for suitable applicants by ICPPD.



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Registration: Applicants who are offered a place will be required to confirm acceptance of their place by:

- (a) completing an [ICPPD Registration Form](#).
- (b) supplying a passport photo (or sending a JPEG image file) to ICPPD.
- (c) supply evidence of current National Garda Vetting.
- (d) supply a copy of professional insurance.
- (e) paying a Registration Fee of €500 (which is credited against course fees) within 2 weeks of being offered a place.

The balance of the fees for the year is payable in full, before the course commences, or by availing of an agreed ICPPD payment plan.

Once an applicant accepts a place on an ICPPD programme, any fees paid become subject to ICPPD's Financial Terms & Conditions, which are outlined in the [ICPPD's Quality Assurance policies](#) in relation to refunds, payment plan, etc.

Induction: Learners are required to attend a mandatory Induction Session, prior to programme commencement, to meet with their programme leader, tutor(s) and class group and gain further information about the content of the course, available learner supports, the rules and regulations of ICPPD, and the relevant Professional Codes of Ethics and Practice.

Delivery: Refer to programme timetable.

Please Note: It is mandatory to attend 1 learner support and 1 progression meetings during the academic year. These may be scheduled on weekdays and dates will be identified to learners on their timetable prior to commencement of each academic year.

APPLICATION DOCUMENTATION CHECKLIST

To facilitate consideration of your application in a timely fashion, please ensure that you have included the following documentation before you submit this application form to ICPPD.

Primary Qualification in Counselling and Psychotherapy, i.e., Level 7, professional diploma or equivalent qualification <i>[documentary evidence required i.e., copy of certificate(s)]</i>	YES <input type="checkbox"/>
Evidence of current National Garda Vetting	YES <input type="checkbox"/>
Evidence of professional insurance	YES <input type="checkbox"/>
Letter from Accredited Personal Therapist - to confirm 50 hours of Personal Therapy completed	YES <input type="checkbox"/>
Letter from Accredited Supervisor - to confirm 100 hours of supervised Client Work completed	YES <input type="checkbox"/>
Application Deposit €100	YES <input type="checkbox"/>
I have included additional documentation to support my application	YES <input type="checkbox"/>