

DIPLOMA in Advanced Supervision across Professions  
– *A Holistic and Integrative Approach*  
IACP Accredited and SAI Recognised Programme  
110+ hours Professional Programme (delivered over 15 days)

## APPLICATION FORM

### PERSONAL DETAILS\*

Name (for Registration):  
*in block capitals*

\_\_\_\_\_

Address

\_\_\_\_\_

\_\_\_\_\_

Date of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_

Tel - Home: \_\_\_\_\_ Tel - Work: \_\_\_\_\_ Tel - Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Current Employment: \_\_\_\_\_

Academic/Professional Qualification:  
*(please attach documentary proof)*

Minimum Entry Requirement met?  
*(please indicate ONE, as relevant)*

Min 4 years' accredited (if a  
counsellor/ psychotherapist)

Min 3 years' post-qualification  
experience as a professional

Professional Membership Details  
(Body/Number), if relevant.

\_\_\_\_\_

Where did you hear about this  
course?

\_\_\_\_\_

*For specific commencement dates and delivery times refer to [www.icppd.com](http://www.icppd.com)*

**\*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.

**Please attach (i) Statement of Interest** of no less than 300 words, clearly stating your desire to engage in this Supervision Training (i.e. why you wish to participate in this programme); and **(ii) a Letter of Recommendation from your current Supervisor.**

*I certify that the information provided on this application (and in my letter) 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.*

Applicant Signature: \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE NOTE:** Applications must be accompanied by a deposit of €100, which is credited against course fees (of €2,500) if the applicant is admitted onto the programme.

Applicants are entitled to a full refund of this deposit if they decide to cancel within 7 days of receipt of their application. Should an application be unsuccessful, or cancelled by the applicant following this 7-day period, this deposit is retained.

Once an applicant accepts a place on an ICPPD programme, any fees paid become subject to the ICPPD's Financial Terms & Conditions, which outlines the College's policies in relation to refunds, payment plan, etc. [ref [www.icppd.com](http://www.icppd.com) for more information]

Please note that progression, and determination of fitness to practice, is at the discretion of ICPPD.

OFFICE USE ONLY

Dep Rec'd: \_\_\_\_\_ ID No Assigned: \_\_\_\_\_