

INTERNATIONAL COLLEGE FOR PERSONAL & PROFESSIONAL DEVELOPMENT

Introduction to Holistic Counselling and Psychotherapy 60-hour programme

APPLICATION FORM		
PERSONAL DETAILS* Name (for Registration): in block capitals		
Address		
Date of Birth:	Nationality:	
Tel - Home:	Tel - Work:	Tel - Mobile:
Email:		
Current Employment:		
		the sole purpose of programme-related admission d securely in accordance with ICPPD's data protection policy.
Where did you hear about t	nis course?	
Preferred Location:	Athlone For specific commencemen	dates and delivery times, per venue, refer to www.icppd.com
Please explain why you wis	h to undertake this course now:	
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Applicant Signature:		Date
 photo to <u>admin@icppd.com</u>. A brief PLEASE NOTE: Applications must be onto the programme. Applicants are entitled to a full refunc unsuccessful or cancelled by the applic Once an applicant accepts a place on 	Interview (which may be conducted over accompanied by a deposit of €100, which is a of this deposit if they decide to cancel with ant following this 7-day period, this deposit is re the programme, any fees paid become subject , payment plan, etc. [ref <u>www.icppd.com</u> for mo	t to the ICPPD's Financial Terms & Conditions, which outlines the re information]
OFFICE USE ONLY Dep Rec'd: ID No Assigned:		
Dep Rec'd:		