

APPLICATION FOR FACE-TO-FACE TRAINING COURSE

NAME: _____

ADDRESS: _____

SUBURB: _____ P/CODE _____

PHONE: _____ MOBILE: _____

E MAIL: _____

QUALIFICATIONS IN COUNSELLING COMPLETED: _____

QUALIFICATIONS IN COUNSELLING IN PROGRESS: _____

COUNSELLING EXPERIENCE: _____

RELEVANT SHORT COURSES, WORKSHOPS, IN-SERVICES etc. _____

PRESENT WORK COMMITMENTS: _____

CONTRACT:

I understand that on the satisfactory completion of this course and having the qualifications necessary for registration with PACFA, I may be appointed by the Board of Newcastle & Hunter Lifeline as a face-to-face Personal Counsellor. I will be available for a minimum of five counselling session a week at Lifeline for at least two years following my appointment.

Signed: _____

Date: _____

WITNESS: _____

Date: _____