**Application Guidance Notes**

Further information regarding the application process is available from our SPTI website via this link <http://spti.net/training/application.shtml>

Applicants are welcome to hand write or type the enclosed application form and you should ensure that all compulsory sections are completed in full and that you sign and date the declarations in section 16. The application form must be returned with your official signature; this can be done by use of an electronic paste of your signature, or by typing your name into the appropriate boxes. You should then submit your application via email to admissions@spti.net .

**1. Your Personal Information**

We respect your privacy and are committed to protecting your personal data. Our privacy notice is available on our website at <http://spti.net/institute/privacynotice.shtml>. Please make sure you take the time to read and understand our privacy notice.

#### 2. Applying to a course at SPTI

Selection is via application form, references and a personal interview. To accompany your application, you will need:

* Two **Reference Request Forms** <http://spti.net/Downloads/forms/SPTI-ReferenceForm.pdf>
* In the case of potential APL's (Accredited prior learning), please refer to <http://spti.net/training/part-way.shtml> for further guidance. We also recommend that you book onto an Information Day to meet with the Programme Leader and to discuss your circumstances.

The information below details how the admissions process works, supported by the SPTI Admissions Policy. A copy of the full policy can be downloaded via the following link:

* <http://spti.net/Downloads/documents/SPTI%20Admissions%20Policy%20V08%202019.pdf>

**Full Legal Name**

Your full legal name is required (including all middle names) as this is used to register you with SPTI and also the validating University for BSc & MSc students. This name must match your official identity documentation e.g. Passport / Birth certificate. Any subsequent changes to your legal name must be evidenced by official documentation such as a marriage certificate or deed poll change of name.

**Reference Request Forms**

Forms will need to be completed by each of your two referees, and returned to Admissions. They should be submitted with the separate reference letter, produced where possible on company headed paper. Obtaining and ensuring references are received is the responsibility of the applicant.

**DBS** **Certificates**

(Disclosure and Barring Service - formerly CRB Criminal Records Bureau) - All MSc and BSc students are required to undertake an enhanced DBS check before or at enrolment (£57\*) and also to register their official DBS certificates with the DBS Update Service <https://www.gov.uk/dbs-update-service> (currently £13 annually).

\*prices correct at going to print

**Criminal Convictions**

Under Home Office regulations, SPTI is entitled to seek criminal records checks to assess applicants’ suitability for entry to any of our Psychotherapy and Counselling degree programmes. The SPTI Application Form requires applicants to declare if:

“You have any convictions, cautions, reprimands or final warnings that are not ‘protected’ as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013)?”

If your answer is yes, please complete the DBS01 Criminal Conviction Declaration.

* DBS01 Criminal Conviction Declaration (returned with the completed Course Application) <http://spti.net/Downloads/forms/DBS01_Criminal_Conviction_Declaration.pdf>
* SPTI Policy and Procedure on the Monitoring of Criminal Records of Trainees <http://spti.net/Downloads/documents/DBS_Policy_Monitoring_Criminal%20Records_Applicants_2019_V3.pdf>

**Application Deadlines**

Applications are processed on a first come, first served basis, therefore early applications are advised to avoid disappointment. Applicants should contact the Admissions Office in the first instance to confirm places are still available.

**Application Processing Timescales**

**W**e aim to respond to all applications within one month of receipt, if not sooner. In cases where this is not possible, applicants will be informed accordingly.

**Interviews**

For applicants selected for interview, the interviews usually last between 30-45 minutes and are usually with the Programme Leader. The nature of psychotherapy training is primarily relational and as such it is important for applicants to disclose any pre-existing relationships with SPTI staff and/or members (and other applicants where known) at the point of application and interview.  This provides the opportunity to address any potential implications at the interview stage and we aim to ensure that this does not provide an unnecessary barrier to recruitment. In cases of pre-existing relationships, adjustments may be suggested which could include an alternative entry point or in some cases an alternative programme of study. During the interview, you will be asked to confirm if you have any criminal convictions.

**Offers**

Offers are made following successful interview. Applicants to SPTI clinical training programmes (BSc & MSc) are reminded that all offers are subject to a satisfactory criminal record check by obtaining an adult enhanced DBS Certificate. Acceptances of offers are processed on a first come, first served basis. Places are secured on receipt of the required deposit and written acceptance of the offer.

**Deposits**

Deposits are required to secure student places. The deposit is non-refundable and is deducted from the tuition fee amount.

**International Students**

SPTI is not a UK Home Office registered Sponsor with approval to admit overseas students. We can only consider applications from applicants who satisfy HOME fee residential status criteria e.g. UK/EU/EEA including Switzerland.

**If you need any more help in making your application, please do not hesitate to** [**contact us**](file:///W%3A%5CSPTI.net%5Cinstitute%5Ccontactus.shtml)**.**

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| **Section 1: Course Application** |
| **Please tick** **🗹** **or highlight your chosen course & year of entry:**❑ BSc (Hons) Counselling & Psychotherapy (**BACP** accredited)❑ MSc Integrative Psychotherapy (**UKCP**)❑ MSc Person-Centred and Experiential Psychotherapy (**UKCP**)❑ SPTI Diploma in Clinical Supervision | **Academic Year of Entry****❑ 2020/21****❑ 2021/22** |
| ❒I have attached my completed **APL** (Accredited Prior Learning) form to apply for direct entry into ❑ **Year** **2** ❑ **Year** **3** |
| **Section 2: Personal Information** |
| **Full Legal Name** *(Passport/Birth Cert. name)* | *(Please note: this name will be used for official certificates and must include all middle names)* |
| **Informal Name** | *(To be used for correspondence, Moodle & email account)* | **Title***(e.g. Dr/Mr/Mrs/Miss/Ms)* |  |
| **Previous names***(Any name changes)* |  | **Date of Birth** |  |  |  |
| **Address** **Postcode**  |  | **Please confirm your Sexual Identification** [**Equality Challenge Unit**](http://www.ecu.ac.uk/guidance-resources/using-data-and-evidence/monitoring-questions/) | ❒ Female❒ Male ❒ Other |
| **Home Telephone** |  | **Mobile Telephone** |  |
| **Email address** |  |
| **Where did you hear about us?** |  | **Info Day** **Date Attended** |  |
| **Section 3: Counselling Qualifications (include any courses you have yet to complete)** |
| Organisation Name, Address & Postcode | Start | End | Subject | Level | Grade | MM/YY Passed |
|  |  |  |  |  |  |  |
| **Section 4: Higher Education Qualifications (Level 4 / Undergraduate and above)** |
| Organisation Name, Address & Postcode | Start | End | Subject | Level | Grade | MM/YY Passed |
|  |  |  |  |  |  |  |
| **Section 5: Other Qualifications (School / College / Adult)** |
| Organisation Name, Address & Postcode | StartMM/YY | EndMM/YY | Subject | Level e.g. GCSE, A level, BTEC, NVQ | Grade | MM/YY Passed |
|  |  |  |  |  |  |  |
| **Section 6: English Language Qualifications** |
| **Is English your** **First Language?** | ❒ **Yes** ❒ **No** | If English is **not** your first language please provide details of your English Language qualifications |
| **English Language Qual.** | **IELTS** | **TOEFL** | **OTHER** *(Please specify)* |
| **Grade/Level/Score** |  |  |  |
| **Date Passed** |  |  |  |
| **Section 7: Professional Experience** |
| Organisation Name & Address | Nature of work | Paid /Voluntary | Date From | Date To |
|  |  |  |  |  |
| **Section 8: Other Experience** |
| Organisation Name & Address | Nature of work | Paid /Voluntary | Date From | Date To |
|  |  |  |  |  |
| **Section 9: Have you received counselling or psychotherapy** |
| ❒ **Yes** ❒ **No** (*If Yes, please provide details)* |
| **Section 10: Referees** |
| **We require two supporting references**. **It is your responsibility to forward the Reference Request Form to your chosen referees requesting them to return the completed forms together with letters of reference directly to Admissions as soon as possible**. The first reference should ideally be from your current/most recent employer and/or academic institution; Ideally the referee will have known you for at least two years. The second reference can be from another source. Please note that references from family members and friends are not usually acceptable. Both references should be provided on **headed paper**, be signed by the referee and returned to SPTI together with an A02 Reference Form. References should clearly state the full legal name of the applicant. |
| **First Referee** | **Second Referee** |
| **Name** |  | **Name** |  |
| **Job Title** |  | **Job Title** |  |
| **Organisation** |  | **Organisation** |  |
| **Address** |  | **Address** |  |
| **Relationship to applicant** |  | **Relationship to applicant** |  |
| **Length of time known** |  | **Length of time known** |  |
| **Email** |  | **Email** |  |
| **Telephone** |  | **Telephone** |  |

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| **Section 11: Personal Statement** |
| a) Please describe your reasons for wanting to embark on this course at this time in your life  |
| b) Please describe personal strengths and attributes which you believe will assist you in relation to your selected programme of study, together with any personal limitations and/or characteristics you believe may impede you. |
| c) Please outline ways in which you believe the psychotherapy/counselling approach you have decided to apply to study relates to your own personality and experience. Do not hesitate to comment on any areas of ‘conflict’ as well as those of ‘fit’. Please note; you are not expected to know a vast amount about the approach, and it is expected that your comments will reflect your current understanding. This question reflects our belief that the ‘fit’ between the person and the core theoretical approach is important in training. |
| **Section 12: Disability** |
| Do you consider yourself to have a disability and/or learning difficulty? Please tick all that apply(The classifications below are provided from HESA (Higher Education Statistics Agency).  |
| **No** | ❑ If no known disability, proceed to section 13 | 00 |
| **Yes** | ❑ If **yes**, please tick any of the following that apply and include further information below |
| ❑ A specific learning difficulty such as dyslexia, dyspraxia or AD(H)D | 51 |
| ❑ A social/communication impairment such as Asperger's syndrome/other autistic spectrum disorder | 53 |
| ❑ A long-standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy | 54 |
| ❑ A mental health condition, such as depression, schizophrenia or anxiety disorder | 55 |
| ❑ A physical impairment or mobility issues, such as difficulty using arms or using a wheelchair or crutches | 56 |
| ❑ Please tick if unable to use stairs  |  |
| ❑ You are Deaf or a have a serious hearing impairment | 57 |
| ❑ You are Blind or have a serious visual impairment uncorrected by glasses | 58 |
| ❑ A disability, impairment or medical condition that is not listed above. **Please provide more information below** | 96 |
| **Further information:**  |
| Have you undertaken a formal assessment? Please tick. |
| **Yes** | ❑ | **No** | ❑ (This may be requested if successful at interview to support reasonable adjustments) |
| **We are Office for Students (OfS) registered. This means we meet the OfS requirements for course quality, academic standards, student support, student protection and more. For more information, please visit** [www.officeforstudents.org.uk](http://www.officeforstudents.org.uk)DSA (Disabled Students Allowance) support is available to students with qualifying disabilities – See our FAQ’s for further details or alternatively, more information can be found via the .gov website: <https://www.gov.uk/disabled-students-allowances-dsas/how-to-claim> |
| **Section 13: Nationality / Residency** |
| **Country of Birth**  |  | **Country of Permanent Residence** |  |
| **Legal Nationality** |  |
| Do you have a UK Passport?If **no**, which country issued your passport | ❒ **Yes** ❒ **No** | Please attach copies of all passports (front as well as the photo ID page) |
| Do you have the **right to reside** (live) in the UK without restriction? | ❒ **Yes** ❒ **No**  |
| Have you been **ordinarily resident** in the UK/EU/EEA for the **past three years** for the purpose **other than study**? If **no**, please list the countries you have lived in. | ❒ **Yes** ❒ **No**  |
| **How do you intend to finance your tuition fees?** |
| ❒ Self-Financing ❒ SLC Student Loan ❒ Employer/Sponsor ❒ Other *(provide details)*  |
|  |
| **Section 14: Criminal Convictions** **(Including DBS - Disclosure & Barring Service)** |
| **Do you have any convictions, cautions, reprimands or final warnings that are not ‘protected’ as defined by the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013)?**  | **Yes**  | ❒ | **No**  | ❒ |
| If **YES**: Applicants are required to obtain and complete a separate form **‘DBS01** **Criminal Conviction Declaration’**. This document forms part of the SPTI CRRP pack and should be requested from the Admissions Office directly or can be downloaded from the Application page of the SPTI website <http://www.spti.net/training/application.shtml>. This completed form should be submitted in a separate, named, sealed envelope marked “*Strictly confidential CRRP information”*. Please remember to include the course title. |
| **Note:** |
| 1. Applicants are advised under the provision of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 (as amended in 2013) and the Police Act 1997 that a person should declare all convictions (that are not protected) where working with vulnerable adults or children.
2. Disclosure of a criminal record does not automatically debar applicants from consideration. The offence will only be taken into account if it is considered to be one that would make the applicant unsuitable for the type of training for which they have applied.
3. The information provided will be treated as strictly confidential and will be considered only in relation to this application for training.
4. Applicants to our MSc and BSc Psychotherapy and Counselling programmes are advised that they will be required to make a full disclosure during the application and interview process **and** that SPTI will require them to undertake an enhanced adult DBS check if offered a place.
5. The responsibility to disclose a criminal record rests with the applicant. Applicants who fail to disclose a conviction and whose subsequent DBS certificate reveals undisclosed convictions, cautions, reprimands and/or warnings (which are not protected) may have their offer withdrawn, or their registration terminated.
6. Further information regarding the DBS requirements and process can be found at: <http://spti.net/Downloads/documents/DBS_Policy_Monitoring_Criminal%20Records_Applicants_2019_V3.pdf>
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| **Section 15: Equal Opportunities Monitoring**  |
| **Please tick** **🗹** **or highlight your chosen course:**❑ BSc (Hons) Counselling & Psychotherapy (**BACP** accredited)❑ MSc Integrative Psychotherapy (**UKCP**)❑ MSc Person-Centred and Experiential Psychotherapy (**UKCP**)❑ SPTI Diploma in Clinical Supervision | **Academic Year of Entry****❑ 2020/21****❑ 2021/22** |
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| **The information in section 1 will be stored on your records. It will not be considered as part of your application. It will be used for statistical analysis and information sharing only (see guidance note 1 – data protection)** |
| **Please enter your full name below**  |
| **Name** |  |
| **How would you describe your ethnicity?** |
| The classifications below are provided from HESA (Higher Education Statistics Agency). Please tick **🗹** or highlight the appropriate category*(copy and paste the tick symbol above)* |
| **White** ❒ White (10) ❒ Gypsy or Traveller (15)  | **Mixed**❒ White & Black Caribbean (41)❒ White & Black African (42)❒ White & Black Asian (43) ❒ Other mixed background (49) |
|  **Black or Black British**❒ Caribbean (21) ❒ African (22) ❒ Other (29) |
| **Asian or Asian British**❒ Indian (31) ❒ Pakistani (32)❒ Bangladeshi (33) ❒Other Asian (39) | **Chinese**❒ Chinese (34)❒ Other Asian (39) | **Arab**❒ Arab (50)  |
| **Other**❒ Other Ethnic background (80)❒ Not Known (90) | **Ethnicity Information Refused**❒ Information refused (98) |
| *If these categories seem inappropriate or inadequate to you, how would you wish to describe yourself?* |
| **How would you describe your sexual orientation?** |
| ❒Bisexual (01)❒Gay Man (02) | ❒ Gay Woman / Lesbian (03)❒ Heterosexual (04) | ❒Other (05)❒Information refused (98) |
| **Gender Identity** |
| Is your gender identity the same as originally assigned to you at birth? | ❒ Yes (01) ❒ No (02)❒ Gender ID Information Refused (98) |
| **Would you describe yourself as a practising member of any of the following religions?** |
| ❒ No Religion (01)❒ Buddhist (02)❒ Christian (03)❒ Hindu (10)❒ Jewish (11) | ❒ Muslim (12)❒ Sikh (13)❒ Spiritual (14)❒ Any other Religion/Belief (80)❒ Info Refused (98) |
| **Do you feel discriminated against in the application procedures for this course?** |
| Yes ❒No ❒If **Yes**, in what way? |  |

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| **Communication and Marketing** |
| **We may send you marketing information about SPTI courses, programmes and events. These may be similar or related to those on to which you are enrolled pursuant to this application and will be sent via email or post. For example, this may include dates for similar courses or information regarding other training and progression opportunities.** |
| **If you agree to be contacted in this way, please tick or highlight the relevant boxes:** |
| **I agree to be contacted by Post** ❒  | **I agree to be contacted by Email** ❒  |
|  |
| **Declarations (Please sign your official signature – typed names will not be accepted)** |
| **By entering your name into the appropriate fields below, you are legally signing this document and you are declaring that the information included within this application is a true and accurate record**  |
| **Signed:**  | **Date:** |
| **I confirm that I have read and understood the Privacy Notice** <http://spti.net/institute/privacynotice.shtml> |
| **Signed:**  | **Date:** |