



NCPS Advanced Specialist Training courses - Initial Application form

Name of Training Provider:

Title of training course*:.....

.....

*If course has an academic "Level" as part of the title please **specify Ofqual Awarding Body**

How long has this course been running?.....

How did you hear about us?.....

Contact details of course leader/administrator:

Name:

Correspondence Address:

.....

.....

Phone:.....

Email:

Website:

Name(s) Registered Company Director(s):

Please answer the questions below, as well as supplying us with additional information/ examples to show us as much as possible about the course. We will decide if a site visit is necessary.

Course Information

Please describe the **purpose** of the course. Who is it aimed at and what will they achieve from the training? (eg: learning objectives)

Please describe the **structure and content** of the course.

1. How long is it in hours and days?
2. How do students/trainees learn – eg. lectures/discussion/experiential exercises.
3. How are these delivered ? Eg. Face to Face in the room, online synchronous video conferencing or a mixture of these* - (**please specify approx.percentage split*)

Please describe the **premises** and/or **online environment** where training is held:

Please list full address(es) for training locations (*if different to correspondence address*)

Assessment Documentation

Full Course Content is required for assessment (*ie: tutor notes, powerpoint slides, student handouts etc*)

Please submit all information electronically via **We Transfer**. Ensure all information submitted is clearly labelled and sent in lesson/module order.



Application Checklist

Submitted with this application:

- Full course content
- Copy of current Public Liability and/or Professional Indemnity Insurance Certificate
(evidencing the provision of training is covered)
- Examples of Marketing Materials/Certificates awarded etc for course
- All Tutors, Internal Verifiers and External Examiners* (**if applicable*) CVs
- Signed and dated Society Terms & Conditions
- Complaints Policy (including an Independent Complaints Review (ICR) process)
- Student Feedback (if available)
- Signed Direct Debit Mandate

Communication Preferences

I confirm that I wish to receive the following information from the Society via email:

- e-newsletters and updates
- Membership Surveys

Assessment will commence following receipt of payment and ALL requested evidence and documentation as per the checklist above.

If you are unable to submit your application via We Transfer please contact us for assistance – standards@nationalcounsellingsociety.org.

Thank you for your application.