

APPLICATION FORMS FOR ACCREDITATION

Please remember to keep a photocopy of your personal files
before mailing the original to IACC.

ACCREDITATION APPLICATION FORMS

Dear IACC Applicant:

Thank you for considering accredited membership of the Association. We recognise that the application process is time consuming (both for you and for us!), but we believe that it is important to strive for the highest standards in this important ministry of Christians counselling.

It is necessary that you have maintained your Associate membership for the previous year prior to submitting your application. It is also necessary to show proof of current indemnity insurance to cover your counselling work.

Be sure to read carefully the page on Case Study Format and write them according to this format. Keep copies of all forms you have filled out, and be sure to send **copies** of all certificates and diplomas from training courses, not the originals.

The **Accreditation Application Fee is €75**. This fee must be submitted with your application made out to IACC. The annual membership fee for accredited counsellors is €65.

Sincerely in Christ,

Accreditation Committee

GLOSSARY OF TERMS USED

CONTRACT - A clear, formal, explicit agreement between counsellor and client. A contract helps ensure the 'professional' nature of the relationship.

PROCESS - Evidence of appropriate progress made by the client in response to the counselling model used over the course of the counselling sessions.

MODEL USED - The counselling model should provide a clear structure for the counselling process and be appropriate to the client's situation.

THERAPEUTIC - That which aids change and growth. This may include elements of teaching as in life skills and/or biblical truths, or exploration which enabled insight to the self, such as inappropriate personal defenses and behaviours, etc. thus facilitating change and growth.

INTERVENTION - The assistance used in the change and growth of the client. What was done or said (or the client encouraged to do or say) to help the client make changes to inappropriate thoughts, behaviours, emotions, etc.

OUTCOMES - A clear statement of the end result of counselling including an assessment of abusive the degree to which the client's stated needs as have been addressed.

PERSONAL DEVELOPMENT WORK – How the applicant has internalised and/or applied the training they received to their own life. Areas of growth, self-awareness, changes that occurred from doing the training course.

SUGGESTED CASE STUDY FORMAT

1. **Preamble notes** (approx. 5 lines)
 - * Who the client is – maintaining confidentiality
 - * State whether lead or sole counsellor
 - * Whether Christian or non-Christian client
 - * Where counselling took place and when
 - * Short details about contract used, a copy of contract where available
 - * Supervision arrangements
 - * Model of counselling used.
2. **Paragraph about History** (approx. 8 lines)
 - * Background
 - * Present family situation
3. **Client's Presenting Problem(s)** (approx. 10 lines)
 - * Short explanation of what the client feels they need to work on
 - * Short explanation of what the counsellor feels the client needs to work on
4. **Client's Presenting Symptoms** (approx. 2 lines)
 - * How did the client present in:
 - a) attitude e.g. frustrated, defensive, etc.
 - b) emotions e.g. tapped fingers on chair,
 - c) other observations
5. **Underlying Problems** (approx. 10 lines)
 - * Any further emerging problems which arose during the counselling sessions (whether worked on or not) e.g. sense of not belonging, abused as a child, on or not) e.g. sense of not belonging, abused marriage, etc.
6. **Counselling Relationship and Counselling Process** (approx. 1 ½ pages) [ie: what happened during sessions between counsellor and client.]

NB this is the important part!

 - * How the counselling went
 - * How did you use your preferred model(s) of counselling
 - * What interventions were used and why. What was the outcome and why (include your reactions as a counsellor)
 - * How the presenting problems (even the underlying ones were addressed & concluded
 - * How you used supervision in connection with this client
 - * How you incorporated what you learned in supervision into subsequent counselling.

Section A

PERSONAL DETAILS

For office use: € 75.00 € 65.00

This section contains general information about yourself, your education, occupation, Christian experience and church background. ALL applicants must complete this section

Name: (Mr., Mrs., Miss, Ms.) _____
 (First) (Middle) (Surname)

Address: _____

Telephone: () _____ () _____
 (Day) (Evening)

Date of Birth: _____ Sex _____

IACC No. _____ (if you have previously applied for membership)

If there is insufficient space anywhere on this form, then please continue on a blank sheet of paper.

EDUCATIONAL HISTORY

Please give details of –

Secondary school exams (Junior / Leaving Cert., other) _____

Higher education and qualifications _____

Section A

CHRISTIAN EXPERIENCE

Please give brief details of your Christian life and experiences, and detail your Christian ministry, leadership and other appropriate experience in Church or other Christian work. (If necessary please continue on a blank sheet.)

OCCUPATIONAL HISTORY

Please give details of past and present occupations, with special emphasis on work involving counselling or caring of any type.

Section A

PERSONAL DETAILS

Legal requirements: As this application concerns counselling, it is a requirement that you state any criminal/legal actions taken against you.

MINISTER'S REFERENCE

What church do you currently attend?

Please give below the name and address of a Minister (Pastor, elder, church leader) who is willing to provide a reference as to your Christian character. If your spouse is your minister, you must get a character reference from another Christian leader or elder.

Please give this person the Minister's Reference Form which is enclosed with this application form, and ask them to forward it to the IACC upon completion (it would be courteous of you to provide a stamped, addressed envelope), or they may return it to you in a sealed envelope to return with your application form.

Name:

Address:

Position held:

Section B**COUNSELLING and RELATED TRAINING**

All applicants must complete this section which gives details of training in counselling.

We need to have details of ALL training you have undergone for accreditation as a counsellor. This will include courses which are obvious (specifically in counselling), and also those courses in related areas (such as psychology, Biblical studies, pastoral care, etc.) If in doubt, then include the course. It will help us if you can also include **photocopies** of certificates, brochures, curriculum etc., to help us decide the counselling content of courses. Please do not send us original documents.

While the accreditation committee may be aware of the common abbreviations, please spell out all abbreviations used..

Part 1

Recognised Basic Christian Counselling Course completed (see Accreditation Requirements I. a.)

Date	Organisation	Description of the course	Hours of counsellor training

Part 2

Primary Counsellor Training Modality (see Accreditation Requirements I. a.)

Date	Organisation	Description of the course	Hours of counsellor training

Section B

Part 3

Other Counselling and Related Training

Date	Organisation	Description of the Course	Hours of counsellor training

Section C

COUNSELLING SUPERVISION

ALL applicants for Accredited Membership need to complete this section.

DETAILS OF SUPERVISOR	
SUPERVISOR	
Name:	
Address:	
Telephone: Day _____	Evening _____
Qualifications:	

- You need to give the Supervisor’s Reference Form, which is enclosed with this application form, to your supervisor and ask him/her to forward it to the IACC office.
- We recommend that your supervisor should see both this application form and your case studies (or a photocopy of them) when he/she is writing the reference. We expect the supervisor to comment on your counselling experience and competence.

Section D ACCREDITATION AS A SUPERVISOR

Applicants applying to become accredited supervisors must fill out this page and also apply for general Accredited Membership if you have not done so already. Please list all training courses in supervision that you have undertaken, with dates.

TRAINING COURSES IN SUPERVISION

<u>Date</u>	<u>Organisation</u>	<u>Description</u>	<u>Hours of training</u>

DETAILS OF EXPERIENCE IN SUPERVISION

Please detail your experience as a supervisor, indicating the follow sorts of details:

- * Dates 1987-90
- * Setting Director of a counselling centre
- * Number of counsellors supervised 3
- * Normal arrangements Seen individually for 3 hours per month
- * Other relevant information I also oversaw the training of these trainee counsellors

Supervisors Confidential Reference

Applicant's Name:		
_____	_____	_____
(First name)	(Middle)	(Surname)
Address:		
IACC No. _____ (if known)		

This form supplies a reference from the applicant's supervisor as to the ability and competence in Christian Counselling of the applicant named above, as part of the accreditation process for counsellors by the Irish Association of Christian Counsellors, who are seeking to promote standards of competency and excellence.

To enable a greater understanding of your supervisee's counselling practice, there is a need for a comprehensive knowledge of the supervision that is offered and how it is received and utilised. To this end, we would be grateful if the following questions are answered in as much detail as possible.

Section 1

DETAILS OF SUPERVISOR	DATE:

(First name)	(Surname)
Address:	
Counselling & Supervision qualification held, if any:	

- 1.1 Please state your supervisory relationship with the applicant (eg. Personal supervisor, clinical director, line manager, pastor/elder, etc.)
- 1.2 What other contact and relationship do you have with this applicant? (eg. Pastor/elder, spouse, working colleague, friend, etc.)
- 1.3 How long have you been supervising this applicant?
- 1.4 How frequent are the supervision sessions? (weekly, fortnightly, etc.)
- 1.5 How long is each session?
- 1.6 Do you feel that the supervisory hours received by this applicant are adequate for the number of counselling hours the applicant is carrying?
- 1.7 What form do the supervisory sessions take (eg. Supervisory model used, etc.).
- 1.8 Please give details of counselling experience you have and supervision you receive as a supervisor.
- 1.9 Is your own counselling practice and experience with:
 - a) Christian clients
 - b) Non-Christian clients
 - c) Both
- 1.10 How many people do you supervise at present?

Section 2

DETAILS OF SUPERVISION CONTENT & PRACTICE

- 2.1 On what areas of work have you been supervising this applicant? (eg. depression, anxiety, sexual abuse, bereavement, marriage, etc.)
- 2.2 What do you consider to be the strengths and weaknesses of this counsellor in their practice?
- 2.3 How does the above affect their practice as a Christian counsellor?
- 2.4 Please comment on the applicant's abilities and competencies.
- 2.5 What are the counselling models the applicant understands and uses in their counselling practice?
- 2.6 Do you have any other comments which may be helpful in accrediting this applicant?
- 2.7 Would you recommend this applicant for accreditation by the Irish Association of Christian Counsellors?

Signed _____ Date _____

Name:

Position held:

FINAL CHECKLIST

This final page of the application is a checklist for your use before sending in your application forms.

Along with this form, I have enclosed:

- o A completed set of application forms with 2 case studies.
- o Given reference form to Church Leader/Pastor for them to send direct to IACC or send to me in a sealed envelope to be included with my application.
- o Given reference form to supervisor for them to send direct to IACC or send to me in a sealed envelope to be included with my application.
- o Enclosed the **€75 ACCREDITATION APPLICATION FEE** with my application.
- o Enclosed **photocopies only** of any certificates, diplomas, letters, etc. from training courses.
- o **I have kept a photocopy of all forms** from my application to be kept in my “Personal Counselling Portfolio.”
- o Enclosed the last 100 hours of my supervised “Counselling Log”, **of which 50 hours was completed in the last year**, to support the practical element of my application form. (These sheets must be signed by your supervisor.)
- o I have enclosed a copy of my Liability Insurance coverage.
- o I have read and agree with the Statement of Faith and agree to work within the boundaries of the Code of Ethics and Practice of the IACC.
- o I agree to undertake 40 hours of further training during my five year accreditation period.

(Signature)

(Date)

Thank you for completing these forms. We acknowledge that it has taken you a lot of time and effort, but we trust that you consider it worthwhile to enable us to raise both the standards and methods of practice of Christian counsellors. The process of confirming accreditation may take several months, but the accreditation committee will endeavour to keep you informed of the progress.

RETURN TO: Irish Association of Christian Counsellors
Chairperson of Accreditation Committee
5 Gardiner Row,
Dublin 1

