

# *Nottingham Counsellor Placement Service*

A sub division of  
Nottingham Women's Counselling Service and Counselling Xtra

## **Volunteer Counselling Placement Application Form**

**Thank you for showing an interest in the Nottingham Counselling Placement Service.**

**The purpose of the enclosed questionnaire is to receive information about your-self in order for us to provide a professional effective service for both counsellors and service users.**

**All answers will be treated in confidence.**

**Please return your completed application form and C.V. for the attention of:**

**Sarah Dawes,  
The Nottingham Counselling Placement Service  
3A Pelham Court,  
Pelham Road  
NG5 1AP**

Tel: 0115 960 5577  
[info@counsellingxtra.co.uk](mailto:info@counsellingxtra.co.uk)  
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# VOLUNTEER COUNSELLING PLACEMENT APPLICATION FORM

## APPLICANT INFORMATION

Name:

Current address:

Post Code:

Email:

Home No:

Mobile No:

## COUNSELLING TRAINING

Current Training Institution:

Course:

Course Tutor:

Please list all training courses and relevant experience including voluntary work, workshops etc.

If you are currently undertaking counsellor training, are you expecting this to be a formal placement?

**Yes / No**

If yes please state the course criteria for placements, including personal therapy, supervision, contracts, insurance and B.A.C.P. membership, hours required and length of placement.

How would you describe your personal theoretical orientation?

## COUNSELLING EXPERIENCE UNDER SUPERVISION

Please list your supervised counselling experience -  
Include dates, type and place of counselling work and hours completed.

How do you feel that your life experiences will impact on your counselling work?

## COUNSELLING SKILLS EXPERIENCE

Please include here any other experiences you may have had using counselling skills, e.g. telephone help lines, community support etc.

Have you had experience of your own personal therapy as a client? If yes please describe briefly including theoretical orientation.

Are you a member of any other professional organisation?

If you are offered a volunteer counselling placement, when could you start?

Do you have a disability or any specific needs that you would want to make us aware of so that we can offer you appropriate support?  
If yes, please specify

**Yes / No**

Do you have any criminal convictions?  
If yes, please list them on a separate piece of paper.

**Yes / No**

## REFERENCES

Please give us the names and address of two people who you have asked to provide references for you. We need 2 professional referees. Ideally these should be your counselling trainer and your clinical supervisor, if you do not yet have a supervisor any professional person or employer will suffice.

Name:

Relationship to you:

Address:

Postcode:

Tel:

Email:

Name:

Relationship to you:

Address:

Postcode:

Tel:

Email:

Please use a separate sheet for any further information that you wish us to have in support of your application to become a volunteer counsellor at The Nottingham Counselling Placement Service.

**The information that I have given is correct to the best of my knowledge.**

Signed:

Date:

*Thank you for completing this application. We will be in touch with you soon.*

# The Nottingham Counselling Placement Service

## Person Specification

1. Counsellor to be in advanced training, e.g. P.G. or Professional diploma or advanced certificate.
2. Experience of face -to-face counselling under supervision using a person centred approach.
3. A theoretical understanding of the person centred approach.
4. A commitment to understanding and respecting the Nottingham Women's Centre counselling Project policies and conditions of contract, including a commitment to peer support group meetings and to group supervision within the project.
5. A commitment to understand and abide by the British association for Counsellors and Psychotherapists.
6. The ability to recognise and understand your own process and prejudices with regard to age, class, culture, disability, gender, race and sexuality and how these may affect the way you relate to other workers, volunteers and service users.
7. A commitment to ongoing personal development, support and supervision.
8. The ability to keep confidential records.
9. Self-awareness, e.g. having experience of your own personal therapy.
10. Be willing to adhere to the NWCS counselling policies and procedures and codes of ethics

# The Nottingham Counselling Placement Service

## Equal Opportunities Form

The Nottingham Counselling Placement Service aims to be an equal opportunities service and is committed to equal opportunities practice. To this end, and as far as possible, volunteers recruited will reflect the different social groups in the community at large in order to offer sensitive provision to those people who approach the Nottingham Women's Counselling Project and Counselling Xtra for counselling.

We would ask your help in ensuring that this process takes place by completing the questionnaire below and returning it to the Nottingham Counselling Placement Service along with your application form. This information will be removed from your application form and will be kept separately. It is collected for monitoring purposes only. Completion of this form is voluntary.

|   |               |
|---|---------------|
| 1. I would describe my racial/ethnic origin as                            |               |
| 2. I would describe my sexuality as                                       |               |
| 3. My age is  |               |
| 4. Do you have a disability?  | <b>Yes/No</b> |
| 5. If yes, are you registered?  |               |
| 6. Do you have any dependants?  |               |
| 7. Where did you hear about the Nottingham Counselling Placement Service? |               |
|   |               |