



**Wellbeing Counselling Service**

**Volunteer Counsellor Application Form**



Full name (**including title**):

Date of Birth:

Address:

Telephone contact:

Home:                                          Mobile:                                          Work:

Email:

Current occupation:

Counselling qualifications **already completed**:

Do you have qualifications in online or telephone counselling?    Yes       No  

Primary model of counselling training:

Current counselling course of study and venue:

Starting date of current studies:

Additional relevant courses attended – date & duration of course:

Relevant counselling or counselling skills experience:

Are you able to offer counselling in other languages?    Yes  No

If YES please specify:

Have you suffered any major losses in your life? If so, how do you feel you have coped with them?

Please outline your reasons for wanting to become involved in the work of the service:

I have read and understand the placement information and acknowledge the minimum commitment    YES/ NO

Please complete the following:

**Maximum 100 words - What do you consider to be the role and responsibilities of a volunteer counsellor?**

**Maximum 100 words - What qualities, skills and knowledge do you feel you can bring to working with clients who are bereaved or are affected by cancer?**

**REFERENCES**

Please give the name and address of two people who know you (*not relatives, friends or clients*) and who would be able to provide a reference to support your application. 2 references will be requested if you are successful at shortlisting and **must be received before interview**.

*Note: If you are currently studying towards a counselling qualification and applying for a placement, one referee **must** be your Course Tutor.*

**PLEASE PRINT CLEARLY**

**Ref 1: Full name (Including title) .....**

Full Address: .....

.....

Email: .....

Relationship: .....

Known for how long?.....

**PLEASE PRINT CLEARLY**

**Ref 2: Full name (Including title):.....**

Full Address: .....

.....

Email: .....

Relationship: .....

Known for how long?.....

**Signature of applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

<b>OFFICE USE ONLY</b>	SHORT LIST / DECLINE	
Application form received:		
References requested:		
References received:	Ref 1	Ref 2