MA 15

SECTION 1



# APPLICATION FORM FOR MASTER OF ARTS (MA) IN INTEGRATIVE PSYCHOTHERAPY 2015

Please complete in Block Capitals and return to **Gus Murray**, Dept. of Applied Social Studies, Cork Institute of Technology, Cork on or before **FRIDAY**, **8 May 2015**. Please attach an up-to-date passport size photograph to this application form. Please mark envelope *M.A. degree application* 

Surname:	First Names:	. Title:(Mr/Mrs/Ms etc.)
Home Address:		(IVII/IVII S/IVIS GIC.)
	Home Tel. No	
	Mobile Tel. No	
Address for Osman and descri	Email address	
Address for Correspondence:		**
(if different from above)		
	Date o	of Birth:
Address (Work):		
	Work Tel. No.	:
Occupation/Position Held:		
2. EDUCATION AND TRAINING		
2. EDUCATION AND TRAINING A. Formal Education		
		T
Name of School/College	Qualification Attained	Dates
<u> </u>		

### B TRAINING IN COUNSELLING AND PSYCHOTHERAPY

Training Organisation	Full/Part Time	Course Title	Qualification	Date	Duration

## D OTHER RELEVANT EDUCATION /TRAINING (if any)

Training Organisation	Full/Part Time	Course Title	Qualification	Date	Duration

## **EXPERIENCE**

## A. COUNSELLING AND PSYCHOTHERAPY EXPERIENCE (including current involvement)

Dates	No. of Hours per week	Nature of Counselling	Organisation or place of work

## B OTHER RELEVANT EXPERIENCE (if any)

Dates	Hours	Nature of Work	Organisation

#### 4. CONFIDENTIAL PERSONAL STATEMENT

Instructions:

Please use a separate sheet, which you will put, in a <u>sealed</u> envelope marked "confidential". Please write your name on the personal statement and on the outside of the envelope. Then enclose this envelope with your application form.

Content of personal statement: (About 500 words)

The influences that shaped you and their impact on your psychotherapy practitioning.

#### 3. REFERENCES

Two written references are required for applicants who have not already been on a prior stage of the CIT course. The referees should be people who have known you for some substantial time, who are not related to you and who are in a position to comment objectively on your readiness for the course. You will need to print two copies of the reference form which is attached below. You should give a copy of the reference form and the course description (from the web page) to each Referee. References should be returned confidentially by the Referees by May 8. It is the applicant's responsibility to ensure that the references have been submitted by the closing date

Date: \_\_\_

<b>Declaration</b>
I certify that the information given in relation to this application is correct.

#### Note

Signed: \_\_\_

This application form does not infer or impose any legal obligations on Cork Institute of Technology to provide courses or other services to students. It does not constitute an offer to supply courses or subjects and it is not to be construed as imposing a legal obligation on the Institute to supply courses or subjects in respect of any course of study.

#### Data Protection Act

Information held by the Institute on computer will be used only for the purposes registered under the Data Protection Act 1988, that is the provision of education and training services. A copy of your details held by the Institute on computer is available on request. A fee may be payable for this.

## **Confidential Statement by Referee**

Applicant's Name\_\_\_\_\_

Dear Referee,						
The above named person has applied for a place on the <b>Maste</b> Cork Institute of Technology. You will find details of the course Please return your reference by <b>FRIDAY</b> , <b>8 May 2015</b> to Gus Institute of Technology, Bishopstown, Cork. We thank you for your property of the course of	in the c Murray,	ourse Depar	brochu tment	re whic	h the applica	nt will give you.
NAME OF REFEREE						
ADDRESS OF REFEREE						
TELEPHONE NO: Mobile						
POSITION/OCCUPATION OF REFEREE						
To help us further with our assessment of this applicant, it would be following (algorithm through the following (algorithm through the following (algorithm)).						
the following (please circle the scale).						
	Low				High	
An understanding of the demands of training (e.g. keeping to deadlines, the need for assessment, keeping professional and financial agreements, etc.)	1	2	3	4	5	
His/her awareness of his/her strengths and weaknesses	1	2	3	4	5	
Capacity to engage with other people	1	2	3	4	5	
Integrity (including capacity for confidentiality)	1	2	3	4	5	
Capacity for self-reflection	1	2	3	4	5	
Awareness of peoples different outlooks/frames of	1	2	3	4	5	
It would be helpful if the following information about the applic (1) Motivation and commitment. (2) Intellectual ability. (3) Oral and written communication skills. (4) Personal qualities relevant to working with potentially vulne (5) Potential areas for further development (6) Any other comments which you feel may be relevant to the	rable pe	ople.	overed	in your	r statement b	elow:
STATEMENT BY REFEREE (Please feel free to type this stateme form)	nt on a s	separa	te page	e, sign a	and date it ar	nd return it with this

\_\_\_\_\_ Continued overleaf

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Signed	Date	