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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Level 2 Counselling Skills Application Form The total cost of the Level 2 Counselling Skills Course is £850 plus VAT of £170. The total course fee is £1020.00. Excluding CPCAB Registration Fee of £182. Please note CPCAB have not yet released their new fees so this is subject to change)** | | | | | | | | | | |
| **Please Tick which mode of delivery you wish to register for** | | | | | | | | | | |
| **Online Course** | **Face To Face Course** | | | | | | | | | |
| **Personal Details** | | | | | | | | | | |
| Title (please tick the appropriate box) | Mr | | Mrs | | Miss | | Dr | | Other (Please specify) | |
|  | | | | | | | | |  | |
| First Name |  | | | | | | | | | |
| Surname |  | | | | | | | | | |
| Date of Birth |  | | | | | | | | | |
| Physical Address |  | | | | | | | | | |
| Mobile Phone Number |  | | | | | | | | | |
| Email Address |  | | | | | | | | | |
| Gender (please tick the appropriate box) | Male | | | Female | | | Non-Binary/ Third Gender | | | |
| Current Occupation |  | | | | | | | | | |
| Please state if you are an existing student at Aloe Counselling training, and what course you are currently studying. |  | | | | | | | | | |
| Please state if you are currently studying another counselling qualification at another centre. Please state the name of the centre and what course you are currently studying. |  | | | | | | | | | |
| Emergency Contact name and number. |  | | | | | | | | | |
| **Fees** | | | | | | | | | | |
| **The total cost for the Level 2 Course is £1020, excluding CPCAB Registration Fee £182** | | | | | | | | | | |
| Fee Breakdown |  | | | | | | | | | |
| Non-refundable deposit to be paid within 7 days of acceptance letter | £250+Vat of £170 Total deposit is £420 | | | | | | | | | |
| Balance to be paid as follows (please tick the appropriate box | The balance of £600 is payable in two instalments.  £300, including VAT due  1 September 2025  £300, including VAT, due 1 October 2025. (There is a £30 late fee for any fees paid after these dates) | | |  | | |  | |  | |
| Who will be responsible for the payment of fees (please tick the appropriate box | Myself | | | Employer | | | Other | | | |
| Invoice Required (Please tick appropriate box) | Yes | | | | | No | | | | |
|  | | | | | | | | | | |
| **Qualifications** | | | | | | | | | | |
| Please provide any details of preciously obtained qualifications relevant to studying this course, please ensure you provide any English qualifications that you have.  Please provide details of any examinations that you are due to complete or have already completed | | | | | | | | | | |
| Qualification | Subject | | | Grade/Level | | Awarding Institution/Body | | | Date Achieved | |
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| **Additional Information** | | | | | | | | | | |
| Where possible Aloe Counselling Training Centre will assist in trying to provide support to students with learning difficulties. Please see the questions below and supply us with as much information as possible in order for us to put achievable steps in place. Any information supplied will be treated with the upmost confidentiality, and used only to ensure that you receive the help you need | | | | | | | | | | |
| Do you have learning difficulties/disability or sensory impairment, if yes please provide details (please tick the appropriate box) | | | Yes | | | | No | | | |
| If you answered yes to the above question, please provide details | | |  | | | | | | | |
| Have you had any exam concessions in the past, if yes please provide details (please tick the appropriate box) | | |  | | | | | | | |
| If you answered yes to the above question, please provide details | | |  | | | | | | | |
|  |  |  |  |  |  |  |  |  |  |  |
| **Supporting Information: Please add enough evidence to support the questions asked.** | | | | | | | | | | |
| **Please complete the following question as comprehensively as possible:** | | | | | | | | | | |
| 1)What are your goals and what do you aim to achieve by completing this course? | | | | | | | | | | |
|  | | | | | | | | | | |
| 2)What helping experience do you currently have: | | | | | | | | | | |
|  | | | | | | | | | | |
| 3)In 500 words tell us about yourself. | | | | | | | | | | |
|  | | | | | | | | | | |
| Please tell us how you heard about Aloe Counselling Training (please tick the appropriate box) | Google | | Facebook | Linkedin | Current Student | | Word of mouth | | Other | |
|  | | | | | | | | | | |
| **Important:** All applicants over the age are required to supply a reference. If you are under the age of 19 or have not been in full-time employment for the last 12 months, you will only have to supply a character reference. Reference forms will be attached to the email. Please ensure all references are received before your interview | | | | | | | | | | |
|  | | | | | | | | | | |
| Applicant Signature |  | | | | | | | | | |
| Date |  | | | | | | | | | |
|  | | | | | | | | | | |
|
| **For Office use only** | | | | | | | | | | |
| Pro Forma Received | Yes/No | | | Date Received | | | | | | |
| Deposit paid | Yes/No | | | Date Received | | | | | | |
| Balance in full paid | Yes/No | | | Date Received | | | | | | |
| Instalment 1 paid | Yes/No | | | Date Received | | | | | | |
| Instalment 2 paid | Yes/No | | | Date Received | | | | | | |
| Final Instalment paid | Yes/No | | | Date Received | | | | | | |
| CPCAB Registration Fee Paid | Yes/No | | | Date Received | | | | | | |
| Professional Reference | Yes/No | | | Date Received | | | | | | |
| Character Reference | Yes/No | | | Date Received | | | | | | |
| Photo Id | Yes/No | | | Date Received | | | | | | |