



The Australian Counselling Association

Application to register for the Counselling Programmes

Please send completed applications, together with a copy of your NRIC/Passport/FIN to:
Alive Community Education Centre at 291 New Bridge Road, Oriental Plaza, #02-12, Singapore 088756.
Tel: 63721053 Fax: 62257180 Email: learning@alivecommunity.net
You are required to provide all the information as requested below.

CONFIDENTIAL

Title (Mr, Ms, Mdm, Mrs, Dr, Rev) _____ Surname: _____

NRIC/ Passport/ FIN No. _____ Gender: _____

Name (in full): _____

Address: _____

_____ Postcode: _____

Tel: (Home): _____ (Work) _____ (Mobile): _____

Email: (Home): _____ (Work): _____

Date of Birth: _____ Race/Ethnic Group: _____

Religion: *(If you are a Christian, please state denomination)* _____

Educational Background:

(Please give details of your educational background to-date stating the institution where you received education from. If you received a formal certificate, diploma or degree, please state Title of Certificate, Diploma, Degree, Date Awarded and University or College)

For Example;

1996-2000	Bachelor of Arts	ACE University
1994-1998	GCE A Levels	ACE Junior College

Present Occupation & Workplace: _____

Please place a Tick (✓) in the box to indicate the programme of your interest.

- Certificate in Counselling**
- Diploma in Counselling**
- *Advanced Diploma in Counselling**

**Australian Counselling Association Recognized Training.*

Please place a Tick (✓) in the box to indicate where you learnt about our programmes.

- Internet i.e Website or Email
- Friend
- Brochure
- Church
- Others _____

PLEASE MAKE COMMENTS AS YOU WISH UNDER THE FOUR HEADINGS BELOW.

(While it is not a criteria for enrolling in this course, this provides a necessary idea of your background so that we can advise you further)

1. Your reasons for wanting to embark upon this course.

2. The ways in which counselling skills are important to your present work/life. For instance you may be using counselling skills to help someone in a voluntary organization or a religious setting.

3. Previous Counselling Training, if any, or training related to counselling (e.g. Samaritans of Singapore or some courses related to counselling during your formal education, e.g. a course in social work as an elective during your undergraduate education)

4. Please write here anything else you want us to know about you.

SIGNATURE: _____

DATE: _____

Please note that we will advise on any fees payable with this application.