

psychotherapy today

**Full Name**:

**Address**:

**Town**:

**Postcode**:

**Telephone**:

**Email**:

**Please give a brief description of your duties and responsibilities in your current role:**

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**Please use this space to provide personal information in support of your application** including reasons for applying for the course, reasons for wishing to study with us and any relevant practical experience, interests and achievements. This statement must be your own work (Word Limit 300-500).

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**Where did you hear about the course?**

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**Would you like to receive information about events and courses at the *bpf*?** YES/NO

I certify that the information contained in this application is true and complete. On signing this application form, I confirm that I have read and understood the cancellation and refund policies.

**Signature**:

**Date**:

Please return the completed form electronically to Sandra Pereira, MSc, Post Graduate & Public Courses Officer at [SandraP@bpf-psychotherapy.org.uk](SandraP%40bpf-psychotherapy.org.uk)