



**COSCA (Counselling & Psychotherapy in Scotland)**  
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# COSCA TRAINER ACCREDITATION

## APPLICATION

### Transferring from Certificate to Diploma Level

*Please read the Accreditation of Trainers at Diploma Level Delivering Diploma Courses in Counselling / Specialist Courses (Diploma Level) - Guidelines and Criteria in order to complete this application – [www.cosca.org.uk](http://www.cosca.org.uk) – Accreditation – Trainer. Applicants are required to use the current Guidelines and Application Forms*

PART I: PERSONAL DETAILS
Surname
Forename(s)
Title
Address
Post Code
Email
COSCA membership Number and category

COSCA Accreditation as a Trainer at Certificate Level:	
Current: <input type="checkbox"/>	Lapsed over 2 years <input type="checkbox"/>

Please use **Appendix A** in this document: **Application Elements Checklist** to check that you have submitted all the evidence required for each criteria stated in the COSCA Accreditation of Trainers Transferring from Certificate to Diploma Level Guidelines and Criteria.

You are requested to make clear where that evidence is to be found in your submission.

Office Use	
Date Received	
Payment	

## PART II: SUBMISSION CHECKLIST

### I have checked the following:

- I have submitted all the required evidence to support each criteria
- All the evidence is accurately labelled with the appropriate reference numbers
- My application has been verified
- I have read, signed and dated the declaration below
- I have enclosed the current Trainer Accreditation fee

## PART III: DECLARATION

### I declare that:

- I am applying to transfer from COSCA Trainer Accreditation at Counselling Skills Level to COSCA Counselling Diploma Level and agree to abide by the Guidelines and Procedures for the COSCA Accreditation of Trainers Transferring from Certificate to Diploma Level, to be bound by COSCA's Memorandum and Articles of Association, and to abide by COSCA's Statement of Ethics and Code of Practice
- The evidence I have submitted gives an accurate portrayal of my training and experience in counselling.
- I will inform COSCA of all successful or pending criminal, civil, complaint or disciplinary proceedings brought against me in the future which are relevant to my involvement with counselling skills training
- I will provide such information as COSCA may require from time to time to confirm my continuing eligibility for Trainer Accreditation.
- I have a minimum of £1million public and professional liability insurance cover for all my counselling work
- To the best of my knowledge and belief the information provided in this application is correct and I understand that a failure to disclose on application or during the period of Trainer Accreditation can lead to termination of my Trainer Accreditation and COSCA Membership.
- I will comply with COSCA's arrangements for handling complaints and concerns. (If you wish a copy of COSCA Complaints Procedure, please contact the COSCA office.)

Print Name:

Signature:

Date:

## APPENDIX A: APPLICATION ELEMENTS CHECKLIST

### COSCA Accreditation of Trainers Transferring from Certificate to Diploma Level

Criteria	Evidence	Included (tick) ** see below
1.0 Application	Application form and cheque	
2.1 Membership of COSCA	Membership category and number	
2.2 Application Form	Application form completed	
2.3 Counselling Qualifications	COSCA Diploma in Counselling or equivalent  Practitioner Membership of COSCA	
2.4 Counselling Training Experience: Trainers Delivering Diploma Courses in Counselling  <b><u>OR</u></b>  2.5 Counselling Training Experience: Trainers Delivering Specialist Courses (Diploma Level)	Significant involvement in delivery of training  Evidence of support available and reflection on it  Significant involvement in delivery of a COSCA Validated/Initially Validated Specialist Course (Diploma Level)  Evidence of support available and reflection on it	
2.6 Professional Development	Accreditation at Certificate Level (current or lapsed)  If lapsed over two years, a statement (500 words maximum)	
2.7 Supervision of Training Practice	Supervision of Training Practice Name of Individual Supervisor	
2.8 Trainer Qualifications	Accreditation at Certificate Level (current or lapsed)  ➤ Trainer Qualifications	

**\*\* Please include in the end column the appropriate page number from your application.**

**APPENDIX B: COUNSELLING TRAINING EXPERIENCE – TRAINERS  
DELIVERING DIPLOMA COURSES IN COUNSELLING**

**COSCA Accreditation of Trainers  
Transferring from Certificate to Diploma Level**

Complete the table below with the number of hours you have completed for each of the nine elements.

You must meet the minimum number of hours for at least five elements.

<b>Element</b>	<b>Number of Hours</b>
Writing and managing the programme (including selection of the syllabus) (min. 178 hours)	
Teaching theory (in 'classroom' conditions) (min. 45 hours)	
Leading skills training sessions (e.g. Triads) (min. 60 hours)	
Tutoring (e.g. for written assignments), including marking (min. 120 hours)	
Delivering group counselling supervision with one or more cohorts of participants and co-ordinating counselling supervisors for participants (min. 150 hours)	
Co-ordinating or organising placements and relating to managers (min. 50 hours)	
Co-ordinating experiential groups which are an integral part of the course (min. 90 hours)	
Taking part in formal assessment procedures (min. 192 hours)	
Giving continuous feed-back on personal and professional development to participants (min. 120 hours)	

<ul style="list-style-type: none"> <li>➤ You are required to demonstrate evidence of yourself as a reflective trainer by providing no more than 2 examples of how your training practice meets each of the elements, outlining what you do as a trainer, how you do it, and the significance of this to your development as a trainer. You are required to evidence each element in a reflective, and exploratory style, giving a sense of both your strengths as a trainer and of your identified areas for development.</li> </ul>
<ul style="list-style-type: none"> <li>➤ You are required to provide a reflective statement (no more than 500 words) on the formal and informal support you receive as a counselling trainer</li> </ul>

**APPENDIX C: COUNSELLING TRAINING EXPERIENCE:  
TRAINERS DELIVERING SPECIALIST COURSES  
(DIPLOMA LEVEL)**

**COSCA Accreditation of Trainers  
Transferring from Certificate to Diploma Level**

Complete the table below with the number of hours you have completed for your selected elements (five minimum).

You must have completed at least 400 hours in total.

<b>Element</b>	<b>Number of Hours</b>
Writing and managing the programme (including selection of the syllabus)	
Teaching theory (in 'classroom' conditions)	
Leading skills training sessions (e.g. Triads)	
Tutoring (e.g. for written assignments), including marking	
Delivering group counselling supervision with one or more cohorts of participants and co-ordinating counselling supervisors for participants	
Co-ordinating or organising placements and relating to managers	
Co-ordinating experiential groups which are an integral part of the course	
Taking part in formal assessment procedures	
Giving continuous feed-back on personal and professional development to participants	

<ul style="list-style-type: none"> <li>➤ You are required to demonstrate evidence of yourself as a reflective trainer by providing no more than 2 examples of how your training practice meets no less than 5 of the elements, outlining what you do as a trainer, how you do it, and the significance of this to your development as a trainer. You are required to evidence the elements (no less than 5) in a reflective, and exploratory style, giving a sense of both your strengths as a trainer and of your identified areas for development.</li> <li>➤ You are required to provide a reflective statement (no more than 500 words) on the formal and informal support you receive as a counselling trainer</li> </ul>
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**APPENDIX D: PROFESSIONAL DEVELOPMENT****COSCA Accreditation of Trainers  
Transferring from Certificate to Diploma Level**

If applicants are currently COSCA accredited as a trainer at Certificate Level, you are not required to complete Appendix D. Please state in the application form that your accreditation at Certificate Level is currently valid.

**You require 18 hours (or more) of Continuous Professional Development a year for the past two years.**

<b>Dates Year 1</b>	<b>No. of hours</b>	<b>Dates Year 2</b>	<b>No. of Hours</b>	<b>Type of Activity/Experience</b>	<b>Outcomes Achieved</b>

**Total Number of Professional Development Hours:**

Year 1:

Year 2:

## APPENDIX E: VERIFICATION OF APPLICATION

### Application for Trainer Accreditation Transferring from Certificate to Diploma Level

#### 1. Applicant's Name:

Please enter your name below and type of course being delivered and pass this form with your complete application to a suitable verifier.

Name:

#### Verifier:

The applicant named above is intending to apply to COSCA for the transfer of accreditation as a trainer from Certificate Level to Diploma Level. Please read her/his complete application and complete the statement below if appropriate.

I declare that I have read the attached application and confirm that it accurately reflects the knowledge, skills and experience of the applicant named above.

Name of Verifier

Position held

Address of Verifier

Post Code

Telephone Number

Email address

Signature of Verifier

Date

## Payment

Please note that payment for this application requires to be submitted with the application. Fee for this application can be found on [www.cosca.org.uk](http://www.cosca.org.uk) – Costings.

**Payment requires to be received before the Panel meeting date.**

I am enclosing the Accreditation Fee of

I will pay:

Direct to Bank:

Clydesdale Bank PLC

Sort Code: 82 68 05

Account Number: 70174110

Cheque enclosed

Invoice required

*Please add £2.00 service charge*

*Please give invoice details if different from your own details*