



International Society of
Schema Therapy

INTERNATIONAL CERTIFICATION PROGRAMME IN SCHEMA THERAPY

Application for **ADVANCED** Certification Training Programme 2021

Name: (Title and full name for Certificates): _____

Name you prefer to be called by: _____

Profession: _____ Date Qualified: _____

Address: _____

_____ Postcode: _____

Email Address: _____

WORKSHOP DATES

WORKSHOP 1 (3 days): MARCH 2021 & SEPTEMBER 2021

WORKSHOP 2 (3 days): JULY 2021

WORKSHOP 3 (1 day): TBC

Procedure

1. Please complete this application form. Please note that. There are a limited number of training places available on the Certification route and submission of this application does not guarantee a place.
Please be aware that priority will be given to applicants who currently have access to personality disordered clients, or clients with significant personality disorder features.
2. After screening, you will be told whether your application has been successful or not.



3. Payment procedures will then be implemented.

The cost of the **ADVANCED** certification route is £ 4300.00. This includes the required training, 40 supervision sessions of 60 minutes each, assessment of 6 recordings of sessions of which 2 are by independent raters. Application to be received by 1 March 2021. Please do not send any money until you receive your invoice. We will be very happy to organise payment by instalments if required. Please email enquiries@schematherapywales.com to arrange this.

Will you be self-funding? (please circle or delete). **YES** **NO**

If you are not self-funding please provide invoicing details below. Please note that your organisation will not be contacted until your application for training is successful.

Full name of Trust/Organisation: _____

Purchase order Number (if applicable) _____

Name of person organising payment: _____

Name of person/department we should send the invoice to: _____

_____ Postcode: _____

Tel No: _____ Email Address: _____

Please give specific details of the following:

1. Access to personality disordered clients, or clients with significant PD features. Access to clients who are appropriate for schema mode work due to complications, chronicity, failure to respond to treatment or relapse.

2. The length of time you would be able to work with your personality disordered clients and other clients as part of the certification programme? It is essential that you are able to provide longer-term treatments to clients (minimum of 12 months)



3. Any schema therapy training and/or supervision you have already received (if any)

4. The Certification / Accreditation Programme process requires that your supervisor and external rater(s) have access to recorded sessions with your clients. Is this acceptable, and has it been agreed by your workplace/employer?
This is an essential element of training.

5. Academic Training: You must hold at least a Bachelors's Degree.

6. Accreditation for clinical practice: you must be accredited with one of the following regulatory bodies, allowing you to provide one-to-one individual therapy:

- 1) BABCP (Full accreditation is required)
- 2) BACP (at least individual counsellor/psychotherapist accreditation is required)
- 3) Psychologists are not required to belong to the BABCP or BACP but must be eligible for chartered membership of the BPS and must belong to the HCPC.

Applicants not holding accredited membership to one of the above bodies may still be eligible to join an ISST-approved training programme if they hold a **core qualification in mental health**. Please see the ISST website for further details.

Please give all details including dates and membership numbers:

7. ISST regulations stipulate that you must complete the certification/accreditation process within 3 years. (extensions can be applied for to the ISST in extenuating circumstances) after completing the workshop element of the programme. Can you commit to this.?

8. Your current work as a mental health professional and how schema therapy might be useful. Please limit this to about 150 words.

9. Anything else that you wish to include here.



Please return this form to either the mail address or email address below:

Schema Therapy Wales; Suite 1 33-35 West Bute Street; Cardiff; CF105LH

enquiries@schematherapywales.com

Web: www.schematherapywales.co.uk