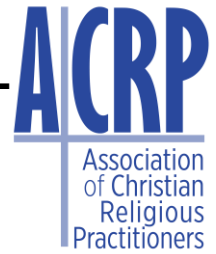




COUNCIL FOR PASTORAL AND SPIRITUAL COUNSELLORS (CPSC)



APPLICATION FORM for ASSOCIATED AFFILIATION (2019)

There are two categories of ASSOCIATED AFFILIATION

(a) The applicant is committed to the CPSC objective but the applicant is not actively involved in any counselling. Pensioners no longer in active practice but still committed to the CPSC objective can also apply for (or change to) this category. No compulsory CPSC CPD points apply to this category.

(b) The applicant is both qualified for and actively involved in counselling but is registered with another professional body or council and therefore does not need a designation with CPSC. No compulsory CPSC CPD points apply to this category as this applicant will already have to comply with the CPD requirements of another body or council

Suitably qualified persons in active pastoral counselling, not belonging to another professional council or body should apply for designated affiliation on a separate CPSC application form for "designated affiliation", this will then be an application for a formal ACRP Designation and CPSC Subcategory based on qualifications, supervision hours and practical hours.

- Please clearly indicate (a) or (b) with an "X" in the appropriate box
- Please complete the form in block letters from page 1 to 3 with black ink or type and do not omit any fields
- The declaration on page 3 needs to be completed and signed before submission
- Please submit your filled out application form with the TWO testimonials on formal letterheads and ID document as requested scanned as a single pdf document. Please do not scan single pages of the application form but do it in one single pdf document.
- Cellular phone photos of documents can not be accepted due to quality loss
- Please remember to attach a copy of the ID Document to the pdf document
- Please attach Proof of Payment of the total amount determined by your application date, see page 4 (R150.00 administrative fee plus Annual CPSC Subscription and ACRP affiliation fee), the ACRP affiliation fee will be transferred to the central ACRP account by CPSC.
- Incomplete filled out forms or forms without the proof of full payment cannot be processed.

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1. PERSONAL DETAILS	Title	Gender
Surname	Initials	Disability (SAQA Field)
Full name(s)	ID number	Race (African/Coloured/Indian/White) (SAQA Field)
Preferred name	Date of birth	Passport number

Postal address		Street address and city	
Postal Code		Province	Country
Tel no (work)		Tel no (home)	
Fax no		Cell no	
Religious affiliation (optional)		E-mail address	
		Website	
Highest relevant qualification obtained, date awarded, training institution		Home language	
		Other languages	
<p>Have you ever been under disciplinary action by any professional organization or licensing board? YES _____ NO _____</p> <p>Have you ever had a felony conviction? YES _____ NO _____.</p> <p>If yes on any of the above, give a brief description of the offence and the action taken.</p>			
2. PRESENT POSITION			
Occupation			
Description of your work and special field(s) of interest e.g. addictions, marriages, trauma, etc.:			
<p>(a) Are you actively involved in pastoral counselling? <u>Please indicate clearly with X:</u> YES _____ NO _____</p> <p>(b) Are you registered with another professional body and do not need a designation: YES _____ NO _____</p> <p>(c) Are you suitably trained in the field of pastoral counselling? <u>Please indicate with X:</u> YES _____ NO _____</p> <p>Please read carefully</p> <p>(1) If YES in (a) (b) and (c) no additional compulsory CPSC CPD points will apply</p> <p>(2) If NO in (a) no compulsory CPSC CPD points will apply</p> <p>(3) If YES in (a) NO in (b) but YES in (c) please apply for <u>designated affiliation on the applicable form</u> to obtain an ACRP designation. Associated affiliation is then not the correct type of affiliation for you</p>			

3. REFERENCES

Provide the name and details of **TWO** references (e.g. pastor, colleagues, study leader or employers), with a letter of reference or testimonial from each on a letterhead.

Family members, friends and clients may **not be used** as references.

NB One or both of the two testimonials should be less than one year old and should reflect your work ethic if you are involved in counselling in any way or manner.

Name	Address	Tel/Cell no	E-mail address	Nature of relationship

4. PROFESSIONAL BOARDS AND ORGANISATIONS

State the organisations/associations you are affiliated with

State the professional boards/bodies (e.g. HPCSA and SACSSP.) you are registered with, as well as your registration number(s)

5. DECLARATION

I, _____, as a Christian counsellor (if actively in practice) share a commitment to Biblical truth and Pastoral excellence and I am committed both to the integration of Biblical theology with the principles of counselling and to the development of excellence in my own counselling and practice. I accept the principles and values of the Association of Christian Religious Practitioners (ACRP) and the Council for Pastoral and Spiritual Counsellors (CPSC) and I understand the responsibilities and obligations of affiliation to ACRP and CPSC.

I agree to abide by its Code of Ethics and Practice (if applicable) and I will participate in and contribute to the activities of the Council.

In joining CPSC as an associated affiliate, I accept the responsibility to pay my annual dues to remain in good standing and I undertake to cancel my affiliation in writing when wanting to do so. I understand that I will be liable for the subscription for the year in which the affiliation is cancelled.

I also understand that officials of CPSC and ACRP will review and act upon this application and I agree to comply with action that such officials, the Council and its officers and agents may take with such review and I agree to hold such officials, the Council and its officers and agents harmless with respect to any reasonable action they may take during such review.

I undertake to keep the CPSC Office informed of any change in my address and/or particulars.

I hereby declare that the information provided in this form is correct and can be verified on request. **I have included a copy of my identity document.**

Date: _____

Signature (not typed): _____

Submit the completed application form to the CPSC Admin Officer by e-mail to cpsc@acrpafrica.co.za or admin@cpsc.org.za or fax to 0865 105 840.

FOR OFFICE USE

Date of registration and registration number	2019P00
Date for renewal of associated affiliation and certificate	31 December 2019
Associated Affiliation certificate number	CPSC A 00 /19
Name & signature registration officer	

FEES 2019

Administration fee irrespective of application date, this is added to the annual CPSC Subscription which includes the ACRP Affiliation fee	150.00
Total annual subscription for application received January-March (all inclusive)	150.00+310.00 460.00
Total annual subscription for application received April-June (all inclusive)	150.00+230.00 380.00
Total annual subscription for application received July-September (all inclusive)	150.00+155.00 305.00
Total annual subscription for application received October–December (all inclusive)	150.00+75.00 225.00

BANKING DETAILS

Nedbank, Woodlands
Account holder SAAP
Account number 1020501553
Branch code 136-305

NOTES

- Cheques must still be made payable to SAAP (crossed and marked “not transferable”)
- **NB For correct allocation, please use your name and surname as reference to beneficiary**
- **Associated Affiliation is valid until 31 December of the year of application and is calculated pro-rata according to the month of application where applicable**
- **The annual renewal date for CPSC affiliation is 31 December**
- **Associated Affiliation is renewed by payment of the annual CPSC Subscription, this includes the ACRP Affiliation fee.**
- **The annual fee needs to be paid by 31 March to remain in good standing according to SAQA legislation**
- According to SAQA legislation the CPSC Executive may **cancel** affiliation if **annual subscription is in arrears for three months (31 March) and the affiliation must be suspended if still unpaid after 6 months (30 June)**
- **The ACRP affiliation fee will be transferred by CPSC to the central ACRP account**
- The **certificate** issued will be **renewed simultaneously with the annual renewal of affiliation**
- Associated Affiliates are **liable for annual subscription of the full year in which resigned**
- It is a SAQA requirement that **personal details are kept updated** to remain in good standing

Please note that the whole application, preparation and registration process can take between 4 to 6 weeks as applications form part of a sequence and will be handled in the order they were received.

Please determine whether your application has been received by CPSC Admin after 7 days if you have not received response from the Admin office.

NB As registration with CPSC is handled internally and exclusively by CPSC Admin, any and all questions regarding the CPSC registration process and progress should be directed to the CPSC Admin office.