



COUNCIL FOR PASTORAL AND SPIRITUAL COUNSELLORS (CPSC) APPLICATION FORM for STUDENT ASSOCIATED AFFILIATION (2025)



Please see “Student Affiliation Options” on page 3 of the *Student Registration and Affiliation General Information and Application Policy* document for the correct type of CPSC Student Associated affiliation!

NB: Student Affiliates have no CPSC scope of practice.

No compulsory CPSC CPD points apply to this category.

- Please complete the application form in **BLOCK LETTERS** with **black ink** (or type in the spaces provided).
- Please do not omit any fields.
- The **DECLARATION** and **POPI Act Agreement** on page 4 of this application form need to be completed and **hand-signed** before submission.
- **NB:** Please submit:
 - * **your fully filled out application form:**
 - ✓ in numerical order (only the pages with information and/or signatures need to be returned);
 - ✓ all pages facing in the same direction;
 - ✓ all pages scanned together in portrait format;
 - ✓ all pages (with the supporting documents) **as one single pdf document**. Applications consisting of separate pages will be returned.
- **NB:** Please attach:
 - * **The following supporting documents:**
 - ✓ copy of your ID document.
 - ✓ the **TWO** signed testimonials on formal letterheads;
 - ✓ proof of payment;
 - ✓ the proof of current registration at an accredited training institution and
- **Cellular phone photos of documents cannot be accepted due to quality loss!**
- **Student Affiliates** have no annual subscription payments, but need to submit proof of registration at the accredited training institution. A new proof of registration must be submitted every year to renew affiliation with CPSC.
- A **R250 application fee** will apply for the initial student affiliation. Only when a Student Affiliate joins CPSC as a Designated Affiliate, an annual subscription fee will become applicable.
- **NB. Full time students and certain part-time Student Affiliates have no registered CPSC scope of practice** as they are still studying. (Please also refer to page 3 of the *Student Registration and Affiliation General Information and Application Policy* document.) They may operate within their level of training which will determine their training scope of practice, but **must in all circumstances always operate only under full supervision.**
- **Incompletely filled out forms** cannot be processed.
- Please apply for **Designated Affiliation after completion of studies.**

**YOU NEED NOT
SCAN, NOR SUBMIT,
THIS PAGE.**

1. PERSONAL DETAILS		Title:	Gender: Male/Female
Surname:		Initials:	Disability: (SAQA Requirement, compulsory field)
Full name(s):		ID number:	Race: (African/Coloured/Indian/White) (SAQA Requirement, compulsory field)
Preferred name:		Date of birth:	Passport number:
Postal address:		Street address, city, and postal code:	
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: <i>Students must provide proof of registration at an accredited training institution.</i>			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 (if applicable)			
Occupation:			
Description of your work and special field(s) of interest e.g., addictions, marriages, trauma, etc.			
YEARS INVOLVED IN MINISTRY: _____ Years _____ Months.			

Please indicate clearly with an X:

(a) Are you actively involved in pastoral counselling? YES _____ NO _____

(b) Are you suitably trained in the field of pastoral counselling? YES _____ NO _____

Please read carefully:

If you replied **YES** to these 2 questions, please apply for a **Designated Affiliation** on the applicable form to obtain an ACRP designation. (Request form from admin@cpsec.org.za)

Student Associated Affiliation is then not the correct type of affiliation for you.

3. REFERENCES

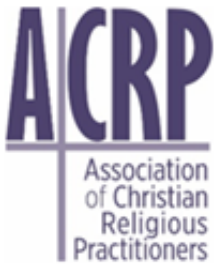
Provide the name and details of **TWO references** with a signed **letter of reference or testimonial** from each **on a formal letterhead**.

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

4. PROFESSIONAL BOARDS AND ORGANISATIONS

State the organisations/associations you are affiliated with:

Please provide information about statutory councils (e.g. HPCSA or SACSSP), or professional body (e.g. ASCHP), that you are affiliated/registered with, as well as your registration number(s):



THE COUNCIL FOR PASTORAL AND SPIRITUAL COUNSELLORS (CPSC) POPI ACT AGREEMENT



I understand and acknowledge that the information provided in this document is provided with consent as per Section 11 of the Protection of Personal Information Act No. 4 of 2013 and may be used for any purpose related to the functioning of the organisation.

Furthermore, any information falling within the ambit of Section 28 of the Protection of Personal Information Act No. 4 of 2013 shall not be exempted from processing by virtue of the nature of the organisation and the functions which it conducts.

ACRP has been recognized as Professional Body by SAQA SAQA Registration number PB0000110



AGREED ON THE TERMS ABOVE AND SIGNED:

Name and Surname:

Signature (not typed): Date:

5. DECLARATION

- I, _____, as a Christian counselling student share a commitment to Biblical truth and Pastoral excellence.
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.
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.

Date: _____ Signature (not typed): _____

Please submit the completed application form and supporting documents to Ilse Grünewald, the CPSC Administrative Officer, at admin@cpsc.org.za

FEES 2025

Registered students in pastoral studies need to provide proof of registration at an accredited training institution.

R250 application fee (once off).

BANKING DETAILS

Bank: Nedbank
Branch: Woodlands
Account holder: CPSC
Account number: 1020501553
Branch code: 136-305

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THIS PAGE.**

- An EFT is the most desirable method of payment, please use this route.
- NB: For correct allocation, please use your **surname and initials** as reference to beneficiary.
- Please also attach the proof of payment to your application.

NOTES

- Student Affiliation is valid until 31 December of the year of application.
- **Student Affiliates should provide proof of registration at an accredited institution and update this every year until full time studies are completed.**
- The annual renewal date for CPSC affiliation is 31 December.
- Student Affiliation is renewed by providing proof of the following year's study.
- The certificate issued will be renewed on receipt of the annual proof of study.
- It is a SAQA requirement that personal details are kept updated to remain in good standing.
- Students will enjoy the same discount as CPSC affiliates when attending CPSC events, e.g., conferences.
- Students will receive 20 CPSC CPD points at the end of every successfully completed year of study and the CPSC CPD points will stay valid for 2 years.
- After completion of the studies, students should apply for Designated Affiliation to receive a SAQA registered designation and linked scope of practice.

Please note that the whole application, preparation, evaluation 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 questions regarding the CPSC registration process and progress should be directed to the CPSC Admin office – admin@cpsc.org.za