



Application for membership of UKCP

Full Clinical Psychotherapist (ECP) 2019–2020

For holders of an European Certificate for Psychotherapy

UKCP fully recognises the European Certificate for Psychotherapy (ECP) as a qualification and welcomes applications for membership from psychotherapists who have been awarded an ECP.

Please ensure that the information that you provide is accurate and clearly legible, and that you read and sign the declaration on page 4.

Please enclose a copy of your ECP certificate with your application form.

There are guidance notes at the end of this form.

Application form

Personal details

Forename _____
Surname _____
Title _____
Date of birth _____
Gender _____

Contact details 1 CONFIDENTIAL – FOR UKCP USE ONLY

Address line 1 _____
Address line 2 _____
Address line 3 _____
Town _____
County _____
Full postcode _____
Country _____
Telephone 1 _____
Telephone 2 _____
Email _____

Contact details 2 PUBLIC – USED FOR ‘FIND A THERAPIST’

Address line 1 _____
Address line 2 _____
Address line 3 _____
Town _____
County _____
Full postcode _____
Country _____
Telephone 1 _____
Telephone 2 _____
Email _____
Website _____

Wheelchair access at this address? YES NO

Do you want referrals via our website? YES NO

Do you speak any languages other than English (please list) _____

Training and professional membership details

I confirm I hold a European Certificate for Psychotherapy YES NO

Professional title (type of psychotherapy practised) _____

Name of UKCP Organisational Member _____

(if you are not with an Organisational Member and want to be a Direct Member, tick one of the College boxes below)

Training organisation _____

Training organisation _____

For Direct Members only:

College you are applying through (please tick one box)

- Council for Psychoanalysis and Jungian Analysis College
- Cognitive Psychotherapies College
- Constructivist and Existential College
- Humanistic and Integrative Psychotherapy College
- College of Hypno-Psychotherapists
- College for Family, Couple and Systemic Therapy
- College for Sexual and Relationship Psychotherapy
- Universities Training College
- College of Medical Psychotherapists

For more information about our Colleges please visit our website www.psychotherapy.org.uk

Applicant declaration

I have read and understand the UKCP's Ethical Principles and Code of Professional Conduct.

I understand that by registering with UKCP I am agreeing that I will work within the boundaries of the ethical framework that these documents define. I recognise that I am also agreeing to challenges to my practice and conduct as a psychotherapist being tested through UKCP's framework for complaints. I understand my responsibility to provide suitable information about ethical codes and complaints processes if requested to do so.

I am aware of the continuing professional development and re-accreditation requirements specified by the UKCP College through which I am registering. I confirm that I have met these standards and submitted all relevant documentation. I understand my responsibility to maintain appropriate records of all of my professional activities. I agree to provide details and evidence of this if selected for UKCP's audit process.

I accept that the UKCP Certificate is UKCP's property and that it should be returned to UKCP if requested.

I understand that in pursuit of the provision of a regulatory framework for the profession of psychotherapy, UKCP will hold and process the information that I have provided in accordance with their policies and procedures (further details of UKCP's Data Policy is available upon request).

Complaints

Please read the following and advise us if any apply to you.

Complaints Have there been any complaints made against you? NO YES

Criminal offences & cautions Have you been convicted of a criminal offence, received a conditional discharge for an offence, or accepted a police caution? NO YES

Disciplined by a professional body Have you been disciplined by any professional body or membership organisation responsible for regulating or licensing a health or social care profession? NO YES

Suspensions & restrictions Have you been suspended or placed under a practice restriction by an employer or similar organisation because of concerns relating to your practice of psychotherapy, competence or health? NO YES

If you have answered yes to any of these questions, please send details in a separate envelope, marked CONFIDENTIAL to:

The Complaints Team, UK Council for Psychotherapy (UKCP)
2nd Floor, America House, 2 America Square, London EC3N 2LU

Please confirm that you are aware of, and comply with, the appropriate regulation/laws related to the practice of psychotherapy/psychotherapeutic counselling in the country where you are practising.

Indemnity insurance is mandatory when you apply for membership. Please explain how your professional work is adequately covered by appropriate indemnity insurance.

Data protection

Information submitted may be stored and processed electronically for the purposes of delivering services, marketing, supplying information and to enable statistical analysis. Data may be passed to other parts of the organisation, partner organisations, companies or contractors operating on our behalf to enable this to take place. This may include transferring or holding your data outside the European Economic Area (EEA). However, we will ensure your data is always stored and handled securely.

I understand that my email address will be used for sending UKCP information.

I understand that in pursuit of the provision of a regulatory framework for the profession of psychotherapy, UKCP will hold and process the information that I have provided in accordance with their policies and procedures (further details of UKCP's Data Policy is available on the UKCP website).

Mailing preferences

Please tick a box to update your mailing preferences. You can review these preferences at any time by logging into your members' account.

- | | | | |
|---|--------------------------|--------------------------------------|--------------------------|
| Event advertising | <input type="checkbox"/> | E-Bulletin | <input type="checkbox"/> |
| The Psychotherapist | <input type="checkbox"/> | Digital version of Psychotherapist | <input type="checkbox"/> |
| Post except Psychotherapist & essential | <input type="checkbox"/> | Email excluding essential membership | <input type="checkbox"/> |

I declare that all the information provided on this form is correct and accurate and I understand that failure to disclose relevant information could result in my membership being withdrawn.

Name

Signed

Date

/

/

Payment options

The annual fee for UKCP membership is £294. Each year all UKCP members renew at the same time. This means for those whose form is received in November will be asked to pay for 11 months, those in December for 10 months and so on. Please see the table below for the fee you will be required to pay.

I would like to pay for my UKCP membership by (please tick the relevant box):

- Annual Direct Debit pay A discounted subscription of £284 is available for members who pay by Direct Debit. Please complete the Direct Debit mandate form (see next page).
- Credit or debit card If you would like to pay by card please provide a telephone number we can call you on to take a card payment when we have processed your application form.
Telephone _____

Security Password

Please provide us with a password so that when we call you to take payment we can verify we are calling from the UKCP: _____

Fees

Joining Month	Portion of Year	Non-Direct Debit Membership Fee	Direct Debit Membership Fee
Oct 2019	12/12ths	£294.00	£284.00
Nov 2019	11/12ths	£269.50	£260.50
Dec 2019	10/12ths	£245.00	£237.00
Jan 2020	9/12ths	£220.50	£213.00
Feb 2020	8/12ths	£196.00	£189.50
Mar 2020	7/12ths	£171.50	£166.00
Apr 2020	6/12ths	£147.00	£142.00
May 2020	5/12ths	£122.50	£118.50
Jun 2020	4/12ths	£98.00	£95.00
Jul 2020	15/12ths	TBC	TBC
Aug 2020	14/12ths	TBC	TBC
Sep 2020	13/12ths	TBC	TBC

If you are unsure how much you should pay please call membership on 020 7014 9955 and select option 1.

If you are paying by Direct Debit or credit/debit card, we will confirm the correct amount to you before payment is taken.

Guidance notes

The following notes are provided to assist you in completing the application form and to clarify what UKCP requires and how we will use the information that you provide. If you require further assistance or would like to read the documents referred to in this form please visit our website www.psychotherapy.org.uk.

Only members who hold a current European Certificate for Psychotherapy should use this form. If you do not hold this certificate please complete our Full Clinical Psychotherapist form.

Addresses

It is important that UKCP has an appropriate address at which to contact each member.

This 'confidential' contact address is the address to which you would prefer postal items from UKCP to be sent. Postcodes are very important. Please ensure that you enter yours correctly.

A public address is required for the UKCP Register; this may be your name and town only. However, for your profile to show on *Find a Therapist* you must provide a full postcode with your town and county.

Please note As a minimum the town or county in which you practice or are resident will be shown against your name on our website, and in our responses to public enquiries. This is to assist the public in identifying and differentiating between members with the same or very similar names.

Email

Most UKCP communication with members is done by email. You can control which emails you receive from us by logging in to our website - you will be able to do this when your application has been processed.

Please make sure that your email address is clear as it is easy to confuse certain characters (for example l and 1).

Telephone

Please ensure that you enter a contact telephone number and that it is in the correct section of the form (for example, UKCP use only, or for public use).

Training and professional membership details

It is important that we know about other professional bodies to which you belong. UKCP is working with other voluntary regulators and professional bodies to improve appropriate information sharing strategies for regulatory matters. We will inform you in writing if we need to communicate to your other membership bodies about your membership. Any communication would be in accordance with UKCP policy and the data protection act.

Please ensure that you identify all UKCP and other organisations at which you have trained in psychotherapy. This information will be used to allow cross checking of qualification, accreditation and training standards details. This is important in providing a sound regulatory framework.

If you have achieved your membership via an accreditation process please ensure that you clearly indicate through which organisation this was originally achieved. For more information on achieving accreditation please go to our website: www.psychotherapy.org.uk.

Return of forms and payment

Please forward your application form to UKCP with the appropriate application fee if you are paying by cheque, telephone number if you would like to pay by credit/debit card or complete the Direct Debit mandate to pay by annual Direct Debit. The address to return it to is:

UK Council for Psychotherapy
2nd Floor, America House
2 America Square
London
EC3N 2LU