



New Zealand
Association of
Counsellors
Te Roopu Kaiwhiriwhiri o Aotearoa

Provisional Membership Application for NZAC Accredited Counsellor Education Programme

Applicant Criteria

To be a Provisional Member of NZAC you need to:

Be a counsellor who:

- 1 Participates in the mahi with the values of tika, pono and aroha.
- 2 Has completed either a NZAC accredited Aotearoa New Zealand Bachelor of Counselling (360 credits), or a Master of Counselling (240 credits), or is a current student in a Master of Counselling programme and is yet to complete the research component.

- 3 Has completed a minimum of 200 hours counselling practice within the Bachelor or Master of Counselling programme.

This can be with individuals, couples, family, whanau.

Up to 120 hours can be Tele-counselling, E-Counselling and facilitation and/or co-facilitation of therapeutic groups.

- 4 Has completed 20 supervision hours.

At least 10 supervision hours external to the counsellor education programme. The external supervisor to be a Member of NZAC or a similar professional association who has been a member for at least 5 years.

The counsellor education programme can provide up to 10 supervision hours. This supervision can be in facilitated groups of up to six people.

The Education Provider will confirm programme supervision has been completed.

- 5 Agrees to work within the NZAC Code of Ethics and to be accountable to the Association while working towards Member status.

Definition: Tele-counselling/E-counselling.

Where the counsellor and client are not physically present in the same space and utilize electronic means for synchronous communication, where each person's response is responded to immediately.

This does not include asynchronous communication where there is a delay between sending a message and receiving a response e.g. email.

Application Dates

Applications for Provisional Membership are accepted at any time of the year.

Please note however, applications are assessed at regular intervals. This means it can take up to three months from the time it is submitted for the application to be processed.

Fees

Assessment fee \$79.35 (incl GST)

(non-refundable if application unsuccessful)

An Invoice will be emailed to you when your application has been submitted.

Fees can be reviewed at any time by National Executive.

General Information

- 1 If your application meets all requirements Provisional Membership status be granted.
- 2 A Police Vetting Report must have a clearance from the Police.
- 3 The information gathered in this application will be kept on file.
- 4 NZAC Provisional Membership may be held for a minimum of 18 months, maximum of five years from date of confirmation. If a Provisional Member has not upgraded to Member at the end of five years, their Provisional Membership will cease unless an extension has been approved.
- 5 The steps for upgrade to Member begin once you are a Provisional Member.
- 6 For the duration of Provisional Membership, you are required to have a NZAC Registered Supervisor who has been a Member for a minimum of 5 years.
- 7 Keep a copy of your application.
- 9 If assistance is required contact applications@nzac.org.nz

Application Checklist

- Your completed application
- A letter from your education provider confirming that you have met the current requirements for provisional membership
- Any personal disclosure statements and advertising material such as business cards
- Police vetting form with applicant section completed
- For non-NZ citizens, evidence of NZ residency or a valid NZ work visa



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Section 1

Provisional Membership Application for NZAC Accredited Counselling Programme

First Names	
Family Name	
Your preferred name	
Date of Birth	
NZ Citizenship status	
Ethnicity	
Iwi/Hapu (if applicable)	
Postal Address	
Town / City / Post Code	
Mobile Number	
Email Address	
Website (if applicable)	
NZAC Branch	
Current Employer	
Length of employment	
NZAC Te Roopu Māori member	Yes / No

Counselling Education Provider

Counsellor education provider	
Name of qualification	
NZQA Level of Programme completed	
Date when qualification completed	

External Supervision

Name of Supervisor(s)	
Professional Association of Supervisor	
Number of hours	

SAMPLE

Section 2

Please circle responses as applicable.

Criminal Conviction or Charges Declaration

Do you have any criminal convictions, or are you under investigation, or have any charges pending in New Zealand or in any other country, other than minor traffic infringements?

Yes	No
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If "Yes" attach a detailed statement of explanation.

NOTE: Where any criminal conviction raises concerns in relation to the People with Convictions Policy an Applicant may be required to attend a Special Interview Panel before the application is processed. This will be at your own cost.

Professional Conduct Declaration

- | | | |
|---|-----|----|
| 1 Are you or have you ever been the subject of formal professional disciplinary proceedings that have been upheld in New Zealand or another country? | Yes | No |
| 2 Are you or have you ever been the subject of a complaint that was upheld to the NZ Health and Disability Commissioner, or an equivalent officer in another country? | Yes | No |
| 3 Have you ever applied, withdrawn or been declined for registration as a health practitioner? | Yes | No |
| 4 Are you currently a member of any other professional association representing counselling, psychotherapy, health or social services field? | Yes | No |

Name of professional association:

You are required to supply a letter from this association to say that you were/are not subject to any concern(s) / complaint(s) about your practice.

- 5 Have you previously been a member of any other professional association representing counselling or psychotherapy?

Yes	No
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Name of professional association:

You are required to supply a letter from this association to say that you were/are not subject to any concern(s) / complaint(s) about your practice.

If you have answered "Yes" to any of the questions above, attach a detailed statement outlining the issues and any sanctions.

Applicant Declaration

I declare that the information provided in this application is true and correct and I will uphold the NZAC Code of Ethics. I authorise NZAC to contact any person or organisation named in this application about any matter relevant to my application.

I also confirm that I have fully discussed in supervision:

- a. Any previous criminal convictions, or any charges pending that I have, other than minor traffic infringements.
- b. Any complaint/s or concern/s raised by any other professional associations.
- c. Any complaint/s or concern/s raised in current or former employment.

Applicant's name: _____

Applicant's signature: _____

Date: _____ / _____ / _____

If you do not disclose all information, or are dishonest in the information given, your application may be declined.

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