



Provisional Membership Application for NZAC Non-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 an Aotearoa New Zealand professional counsellor education programme. This qualification is at least NZQA approved Level 7 or above.

- 3 Has completed a minimum of 200 hours counselling practice within the counsellor education programme.

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

Up to 120 hours of these 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 Has had a minimum of three hours of Puawānanga provided by a Kaitiaki, someone of Māori descent comfortable with Te Ao Māori and can therefore assist the Applicant in their reflection process. See Section 3.
- 6 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 \$142.83 (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 be granted.
- 2 Your Supervisor needs to read your application and discuss it with you.
- 3 Your qualifications and certificates need to be sighted and verified by your Supervisor or Employer.
- 4 A Police Vetting Report must have a clearance from the Police.
- 5 If you have had any complaint(s) about your practice, full disclosure is required in your application. This will be discussed by the Membership Committee before assessment takes place.
- 6 If you have had a criminal conviction(s) full disclosure is required in your application. This will be discussed by the Membership Committee before assessment can take place.
- 7 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.
- 8 If you are not a New Zealand Citizen, provide evidence of either New Zealand Residency or of a valid New Zealand Work Visa. As a Provisional Member, you need to be able to work in New Zealand to complete the requirements for upgrade to Member.
- 9 The information gathered in this application will be kept on file.
- 10 NZAC Provisional Membership may be held for a minimum of 18 months and a 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.
- 11 The steps for upgrade to Member begin once you are a Provisional Member.
- 12 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.
- 13 Keep a copy of your application.
- 14 If assistance is required contact membership@nzac.org.nz applications@nzac.org.nz

Section 1

Provisional Membership Application for NZAC Non-Accredited Counsellor Education 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

Education/Training Provider	
Name of qualification	

NZQA Level of Programme completed	
Date when qualification completed	

Supervision

Name of Supervisor/s	
Programme Supervisor	
External Supervisor	
Professional Association of Supervisor/s	
Programme Supervisor	
External Supervisor	
Beginning and end dates of supervision	
With Programme Supervisor	
With External Supervisor	

Puawānanga Kaitiaki

Puawānanga Kaitiaki Ingoa	
Number of hours	

Placement/Counselling and Supervision Information

Face-to-face counselling practice hours

(Please provide exact numbers of hours)

Counselling hours completed during programme

Counselling hours since completing programme

Facilitation and/or co-facilitation of therapeutic group hours

Supervision Sessions

Number of internal supervision sessions attended during programme

Number of external supervision sessions attended during and since completing programme

Placement Details

Last Placement (name and dates)

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Main Employer now (if applicable)

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Supporting Information Checklist

- Letter from your Education Provider to confirm you have met the programme requirements for Provisional Membership, including programme supervision requirements if applicable.
- Confirmation from your Puawānanga Kaitiaki that you have completed the minimum of three sessions.
- Written reflection on your kōrero with your Puawānanga Kaitiaki.
- Letter of support from your current employer, if applicable, and last placement outlining any counselling related work you have undertaken. Also, to state that you were not, or currently are not, subject to any concern/complaint about your practice.
- Letter from any other professional association you may belong to confirming your status, length of membership and you were not or currently are not subject to any concern or complaint about your practice.
- For non-NZ Citizens, evidence of either New Zealand Residency or a valid New Zealand Work Visa.
- As a Provisional Member, you need to work in New Zealand to complete the requirements for upgrade to Member.
- Details of any group related counselling work counted in total hours of practice, including;
 - a. Name of the group
 - b. Role you had within the group
 - c. Outline the therapeutic nature of the group

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?
- 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?
- 3 Have you ever applied, withdrawn or been declined for registration as a health practitioner?
- 4 Are you currently a member of any other professional association representing counselling, psychotherapy, health or social services field?

Yes	No
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Yes	No
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Yes	No
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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.

- 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:

- Any previous criminal convictions, or any charges pending that I have, other than minor traffic infringements.
- Any complaint/s or concern/s raised by any other professional associations.
- 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.

Section 3

Puawānanga

Have a minimum of three hours of Puawānanga Kaitiakitanga provided by a Kaitiaki, someone of Māori descent comfortable with Te Ao Māori and can therefore assist the Applicant in their reflection process.

The kōrero needs to include;

- Te Tiriti o Waitangi and the significance it has in Aotearoa New Zealand today.
- The impact of colonisation on Māori.

Write a statement which reflects on your kōrero with your Kaitiaki.

Write about your commitment to take the learning into your everyday counselling practice. (*Guide: one page*).

Kaitiaki to complete form found on NZAC website: Membership, Information and Guidelines.

External Supervisor's Report

Complete Parts A & B in collaboration with the Applicant

The Supervisor must be a member of NZAC or similar professional association, who has been a Member for five years and who has been the Applicant's Supervisor for at least the past 12 months. 20 hours of supervision are required before application, 10 of which may have been provided by your education provider.

Part A

Name of Applicant: _____

Name of Supervisor: _____

Professional Association: _____

1 Frequency of supervision

2 Start and end date of supervision contract
Start date:
End date:

3 Total number of hours of supervision undertaken to date (min 20 hours required)

4 Do you have administrative or statutory responsibility for the Applicant's work?

Yes	No
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If "yes" explain this relationship.

In total, the Applicant needs to have completed a minimum of 200 hours counselling practice.

5 Number of face to face counselling hours

6 Number of hours as a facilitator and/or co-facilitator of therapeutic group/s

7 Number of tele-counselling and e-counselling hours

NOTE: 6. and 7. together cannot exceed 120 hours.

8 Counselling Log seen

Yes	No
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9 The Supervisor is required to discuss with their Supervisee at least two recordings or observations of the Supervisee's work with clients.

Your experience of the Applicant's work has been from:

Video Audio Observing counselling session/s

10 To your knowledge has the Applicant ever been or is currently, the subject of a concern or complaint about unethical or unprofessional conduct?

If yes, please explain.

Yes	No
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Part B

The Membership Committee strongly advises you to complete the Supervision Report as a Word Document and then upload to the on-line application format, hence retaining a copy.

Te Rōpū Kaiwhiriwhiri o Aotearoa NZAC invites you as the Applicant's Supervisor to contribute to the Counsellor's application by completing a Report, done in a collaborative kōrero with the Applicant.

As the Applicant's Supervisor you are the person most familiar with their practice, having observed their practice over time and discussed recording/s of their mahi with their clients. Therefore, you are in a unique position to comment on the Applicant's qualities as a Counsellor.

NZAC needs an accurate picture of the Applicant and their mahi so we can adequately assess their suitability for membership. Please comment on the following. You are welcome to include other information.

1. Is the Applicant a safe and competent Counsellor? How is this demonstrated?
2. What do you know about the Applicant's level of self-awareness in their mahi. This may include their cultural awareness. Can they reflect on, critique and articulate their mahi? And respond to change and self-correct when required?

3. A Counsellor's mahi needs to be sustainable, delivering a high standard of practice to the clients they are working with. How does the Applicant manage and maintain their fitness to practice and takes care of their self-care in order to do this?
4. Do you believe the Applicant is suitable to be a Member of NZAC?

As a guide, please write a paragraph about each.

Supervisor Declaration

This application confirms my experience of this Applicant and their work. I have recently viewed/heard recordings of the Applicant's work. I have sighted the Applicant's completed application form and log of face-to-face practice. To the best of my knowledge, the information contained is true and correct and this person is of good character and is fit to practice.

Supervisor's name _____

Supervisor's signature _____

Date: _____ / _____ / _____