

# Provisional Membership Application for NZAC Accredited Counsellor Education Programme

## Applicant Criteria

To be a Provisional Member of NZAC you need to:

Be a person of good character who:

- 1 Has completed either an 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.

- 2 Has completed a minimum of 200 hours counselling practice.

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

Up to 120 hours can be telecounselling, eCounselling and facilitation and/or co-facilitation of therapeutic groups.

- 3 Has completed the following Provisional Membership supervision requirements:

- ▶ A minimum of 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.

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

The Education Provider will confirm programme supervision has been completed.

- 4 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.

## Key Dates

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

## Fees

**Assessment fee**

**\$57.50 (incl GST)**

(non-refundable if application unsuccessful)

An Invoice will be emailed to you when your application has been received by National Office.

Fees will be reviewed 1 April 2022 and may increase after this date

## General Information

- 1 All decisions made are subject to a satisfactory Police Vetting Report.
- 2 If your application meets all requirements the Membership Committee will recommend to the National Executive that Provisional Membership status be granted.
- 3 The information provided in your application will be kept on file until you become a Member or resign your membership. Personal contact details will be used to send you material (newsletters, updates etc.) from the National Office or from delegated representatives of NZAC (e.g. Branch Secretaries).
- 4 NZAC Provisional Membership may be held for 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 If the application is completed on paper, scan and email to [membership@nzac.org.nz](mailto:membership@nzac.org.nz)
- 8 Keep a copy of your application.
- 9 If assistance is required please contact the Membership Manager: [membership@nzac.org.nz](mailto:membership@nzac.org.nz) or refer to the information at <http://www.nzac.org.nz/membership.cfm>

After submitting your application email [membership@nzac.org.nz](mailto:membership@nzac.org.nz) to notify NZAC your application is ready for assessment.

## Applicant Checklist

- Your written application
- A letter from your Education Provider confirming you have met the current requirements for Provisional Membership to be submitted with this application
- Enclosed personal disclosure statements or other advertising material such as business cards, where applicable
- For non-NZ Citizens, evidence of either New Zealand Residency or a valid New Zealand Work Visa
- Completed Applicant section on Police Vetting form



New Zealand  
Association of  
Counsellors  
Te Roopu Kaiwhiriwhiri o Aotearoa

Date received (Official use only)	
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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	
Home Phone Number	
Work Phone Number	
Mobile Number	
Email Address	
Website (if applicable)	

#### Counselling Education Provider

Counsellor education provider	
NZQA Level of Programme completed	
Date when programme completed	
Title of Programme	

#### Supervision

Name of External Supervisor	
Professional Association of Supervisor	

## 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:** All applicants with previous convictions may be required to interview with a Special Panel in accordance with the NZAC’s Good Character Policy before any decision about membership can be made. 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
Yes	No
Yes	No
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: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

## Police Vetting Request Form

<https://www.police.govt.nz/sites/default/files/publications/pvs-vetting-request-and-consent-form.doc>

### POLICE VETTING REQUEST NOTES

The Approved Agency is NZAC.

The agency representative/delegate or identity referee can be:

a person of standing in the community - e.g. registered professional, religious or community leader, Police employee, person registered with the Approved Agency eg NZAC Registered Supervisor

- Be over 16yrs of age
- Not be related to a partner/spouse
- Not be a co-resident of the applicant

**Section 1** Completed by the agency representative/delegate or identity referee.

**Sections 2 & 3** Applicant to complete and sign.

On completion of the 3 Sections upload the Vetting forms to the Application or scan and email to [membership@nzac.org.nz](mailto:membership@nzac.org.nz)