



CRITERION 6

PROFESSIONAL REFERENCE FOR APPLICANT'S APPLYING FOR ACCREDITATION WITH COGNITIVE BEHAVIOURAL PSYCHOTHERAPY IRELAND (CBPI)

GUIDELINES FOR REFEREES

CBPI is a professional organisation, which aims to monitor standards of those persons calling themselves psychotherapists. A person acting as referee must currently be a member of a professional organisation such as the CBPI, IMO, IACP BABCP, An Bord Altranais, ICP, PSI and be able to account for the applicant professional practice (e.g. Line Manager, clinical lead, head of service etc).

CBPI sets and monitors standards for those wishing to become Accredited as Behavioural and/or Cognitive Psychotherapists. The CBPI values the Reference and appreciates an honest appraisal of the applicant. It would be hoped as part of good practice that the reference has been shared with the applicant and any matters of concern will have been discussed with them

Applicant's Name:

Referees Name:

Title: Mr, Mrs, Miss, Ms, Dr. (Please UNDERLINE)

Address:

Telephone:

Email:

Profession:

Job Title:

Employment Position:

Professional Body of which you belong to:

In order to act as a Professional Referee for individuals applying for NACBT Practitioner Accreditation, the referee must be sufficiently qualified and experienced to be able to reliably comment on the applicant's current practice.

Referees Professional Experience

Please describe your Professional relationship to the applicant.

How long has the applicant's practice been known to you.

What is the nature, frequency and duration of your professional contact with the applicant?

It would also be helpful to the Accreditation Committee if the referee commented on the following

What is the nature of the evidence you have of the applicant's practice

What evidence can you give about the applicant's level of competence in their practice of Cognitive Behavioural Psychotherapy

What type of clinical work is undertaken by the applicant (this should include clinical population / therapeutic approach etc

Are you aware of any just cause that this applicant may not be suitable to work with clients in a therapeutic capacity? Would you recommend this applicant for registration? If not, can you suggest what would be required?

DECLARATION

This reference is an honest appraisal of the applicant within the limits of my knowledge of them. Any areas of concern referred to in the Reference have been discussed with the applicant. In accordance with my code of practice I declare that all the information provided by me is accurate.

Name:

Date:

Referees Signature:

After completion return to the applicant in a sealed envelope with your signature across the seal