



CBPI ACCREDITED SUPERVISOR & SUPERVISOR REACCREDITATION APPLICATION FORM

Before applying to CBPI for accreditation it is important that you note the following information:

APPLICANT'S RESPONSIBILITY:

1. You, the applicant, are responsible for ensuring that an application is complete, correct and on time.
2. The onus is on the applicant to check their suitability fulfils the entry criteria for accreditation with CBPI. It is the applicant's responsibility to submit sufficient evidence as proof of meeting the criteria.
3. Applicants will be assessed on the basis of information supplied on the application form together with accompanying documentation. Therefore, do not send a copy of your Curriculum Vitae with your application.
4. It is the responsibility of the applicant to provide full and accurate information in the application and to notify CBPI of any changes or corrections made to the original application.
5. Applications must be submitted as a Hard Copy with all supporting documents. Along with your Hard Copy application you must also submit *high quality, clear* scanned / digital copies of all the forms and supporting documents on a USB memory drive/ stick. If you cannot submit scanned copies you must provide Hard Copies x4 of the application and all the supporting documents. CBPI will not undertake to do the photocopying on your behalf. CBPI will not accept or process unrequested completed application forms or supporting documents submitted by email.
6. CBPI may request verification from the issuing authority of any or all details on documentation presented. Training details requested must be provided.
7. In the light of additional information which was not available at the time of approval, an offer of accreditation may be amended or, in exceptional circumstances, withdrawn.
8. CBPI reserves the right to correct errors made in the communication of decisions and offers.
9. Do not send any original documents. Cognitive Behavioural Psychotherapy, Ireland will not take responsibility for their loss or damage.
10. It is the applicant's responsibility to resubmit copies each time they resubmit an application that has been returned. CBPI accreditation, process a number of applications received. It has not the resources to retain or locate such documentation on your behalf.
11. An application considered incomplete through inadequate completion of the application form or providing insufficient or illegible information or documentation will be returned to the applicant (by Ordinary Post) as it is inadmissible to the process and will require the applicant to resubmit another application.
12. All applications must be accompanied by the correct application fee. Cheque/Bank Draft payable to CBPI.
13. CBPI attempts to process applications in a reasonable and timely manner. CBPI does not expedite applications. CBPI does not take responsibility for delays in processing times.

**TO BECOME AN ACCREDITED SUPERVISOR APPLICANTS MUST
FULFIL THE FOLLOWING TEN CRITERIA:**

1. Trained in a specialised Cognitive Behavioural Psychotherapy course and meet the training standards of CBPI.
2. Have practiced CBT for 5 years post qualification and can demonstrate accountability for their psychotherapeutic practice.
3. Have a deep breadth of CBT experience with a wide range of complex clinical presentations under clinical supervision
4. Be an fully accredited member of CBPI.
5. Have ongoing CBT-specific supervision with a supervisor having CBT knowledge and experience.
6. Provide evidence of maintaining Clinical Practice.
7. Show evidence of sustained commitment to the theory and practice of Cognitive Behavioural Psychotherapy, which includes continuing professional development.
8. Be in receipt of supervision of their supervisory practice
9. Provide evidence of a minimum of 2 years supervisory practice and having completed a clinical supervision course for first time applicants.
10. Provide a professional reference from a member of a professional organisation with current knowledge of your supervisory practice.

UNCONTROLLED VERSION WHEN PRINTED OR SAVED LOCALLY the electronic version on the website is the only version that is maintained

Applicant's Details			
Full Name			
Title	Mr.	Mrs.	Ms. Miss Dr. Prof.
Profession			
Job Title			
Address This is the address used for CBPI correspondence			
Tel Work		TEL. Home/Mobile	
E-mail			

CBPI Full Accreditation details

Please confirm that you have been awarded Full Accreditation and/or Re-Accreditation, if applicable, and the date of the last award

**CBPI Full Accreditation
Expiry Date:**

**Last issued CBPI Accredited Supervisor status
Expiry Date:**

My Full Accreditation or Re-accreditation with CBPI is current and valid

YES

NO

Professional Accountability and dedicated CBT Practice

Current Professional CBT Clinical Practice, give details of the last 3 years, including client population and setting.

As a CBT Therapist

Date	Professional Position	Employed By (or Private Practice)	Professional Accountable to:	Clinical setting	Client Population	Hours Per wk	Total % involving CBT

Please give details of your current Behavioural and/or Cognitive Practice

Summarise your CBT clinical supervision and support arrangement for the last 5 years, including your ongoing current arrangements.

Please provide a Supervisors Report from your current CBT Supervisor, which must be dated within the last month .

I enclose my Supervisor's Report, from my current Supervisor's dated within the last month	YES <input type="checkbox"/>
--	------------------------------

I enclose my Supervisor's Report, from my previous Supervisor's (only required if you had current supervisor for less than 6 months)	YES <input type="checkbox"/>
--	------------------------------

Section 2

Please give details of your current supervision practice.

For first time applicants summarise the Training in Clinical Supervision that you have received.

CBT Supervision of Supervision

Summarise the CBT supervision of your clinical supervision and support arrangement for the last 2 years, including your ongoing current arrangements. Please provide evidence of 2 years of supervisory practice e.g. anonymised clinical supervision notes.

I enclose my Supervisor’s Report, from my current Supervisor of my supervision

YES

Please summarise your sustained commitment to the practice of CBT during the past 3 Years including Continuing Professional Development (CPD) e.g. attending workshops, additional training etc.

Accreditation as a CBPI clinical supervisor is usually for a period of 5 years or for the duration mentioned on the CBPI Accredited Supervisor's certificate.

Supervisor status is defunct and void if your full membership status of CBPI-CLG is not maintained.

Full membership of CBPI and Accredited Supervisor status must be renewed at the same time.

Re-accreditation requirements:

1. Evidence of 50 hours of Continuing Professional Development per year (CPD Log) examples of suitable activities for CPD may be requested.
2. Evidence of at least an hour per month for the provision of Clinical Supervision and Supervision of your Supervision throughout the 5 year period. Supervisors report for both

Declaration

I confirm I have read and understood the CBPI criteria, requirements to maintain the approved status and guidance notes before making this application. I accept the information in this application is accurate and true. I understand that CBPI-CLG has the right to verify or to ask me to verify any information contained in my application and to ask me to supply additional information in relation to my application. CBPI may ask me to supply this additional information by means of a declaration. I agree to Garda vetting.

I understand that if my application is accepted I will agree to abide with the Code of Professional Conduct as adopted by Cognitive Behavioural Psychotherapy Ireland

NAME:

Signature:

Date

UNCONTROLLED VERSION WHEN PRINTED OR SAVED LOCALLY the electronic version on the website is the only version that is maintained.

Enclosures	Tick	
Clinical Supervisor's Report		Return all documentation to: CBPI Accreditation Committee 2, Winton House (The Lighthouse Clinic) Miltonsfields Dublin Road Swords Co Dublin K67 KW54 E: info@cbiti.ie
Supervision of Supervision Report		
Certificate/ Evidence of Supervision Training		
CPD Log		
Evidence of providing Supervisory Practice x2 years		
Processing Fee €80 (Cheque/Bank Draft payable to CBPI)		