

Canadian Certified Counsellor (CCC) Application Form

Member ID: _____ (All applicants must be a member of CCPA in order to apply for certification)

INCOMPLETE FORMS WILL NOT BE PROCESSED 1. Applicant Information Name: First name: Last name: Other Legal Names: Address: Number and street: City, Province, Postal code: Email: Email: Telephone: (cell): (home): (fax): (work): 2. Education (Must hold a graduate degree in counselling or related field) University Year Degree Major Graduate 1. Degree (s) 2. 3. Graduate-level coursework toward certification (located on transcript(s), minimum 8 full courses): Course Code Course Title Semester Completed Counselling Theory (Compulsory) Supervised Counselling Practicum/Internship (Compulsory) Counselling & Communication Skills (Compulsory for graduates after Sept 2012) **Professional Ethics** (Compulsory for graduates after Sept 2012) 3. Elective Courses (please refer to the corresponding section in the Certification Guide) 1. 2. 3. 4. Continued on next page

5.				
6.				
1 Documenta	tion: All applicants must provide each of the following pieces of documentation	on Please check off		
4. Documentation: All applicants must provide each of the following pieces of documentation. Please check off each document that you have prepared or intend to submit				
☐ Official to	ranscript			
Sent to CCPA by mail in a signed and sealed envelope from the university, or emailed directly from				
the issuin	the issuing university as a password-protected unalterable PDF document to CCPA National office.			
	Electronic copies of the transcript from the applicant, mailed transcripts with a broken or tampered			
	seal, any type of faxed transcripts, scanned, or photocopied versions of the official transcript will not			
be accepted toward certification as the authenticity of these documents cannot be verified.				
☐ Course descriptions from an official source				
These must be official syllabi or course descriptions from the academic course calendar from the				
years that you attended your Masters of Counselling. Normally, these documents can be obtained				
from the university registrar's office. These documents may be photocopied or scanned and sent to us				
by mail or fax, or sent by email in an unalterable PDF (including URL and retrieval date information if it is saved from the official university website). Applicants who cannot obtain an official document can				
	University for archived copies. If archives are unavailable, the Universit			
	sting that they are no longer available in order for your application to be	•		
□ Vulnerable Sector Criminal Record Check				
The original hardcopy, issued by the police within the past 12 months, must be mailed to CCPA from				
	the applicant, or sent directly from the issuing police service by email as a password-protected			
	unalterable PDF document. Electronic copies from the applicant, faxed documents, scanned, or			
	ed versions of the check will not be accepted toward certification as the s cannot be verified.	e authenticity of these		
document	s carriot be verified.			
5. Pathways Documentation: All applicants must apply based on <i>either</i> Pathway ONE <i>or</i> Pathway TWO.				
PATHWAY ONE, for applicants who graduated within the last five years. Education and Practicum Training:				
☐ CCC Practicum Form(s) One form per practicum placement. Altogether the forms must attest to a				
total of 15	0 hours of direct client counselling.			
☐ TWO CCC Reference Forms : Must be completed by a graduate-level counsellor, counsellor-educator,				
or counse	lling supervisor. The individual must be someone in a non-compliant re	lationship with you.		
OR . PATHWAY	✓ TWO, for applicants who graduated over five years ago. Education ar	nd Work Experience:		
	k Experience Form(s)	'		
	per employer/workplace. In total, Attesting to 800 hours of direct client couns	selling (the equivalent of		
	practice) within the last five years from the date of their application.	3 (1		
☐ Current r	ésumé.			
□ TWO CCC Reference Forms				
	ich must be completed by a clinical supervisor who has engaged in for	mal supervisorv		
	activities according to CCC criteria and can speak to the applicant's competencies. Forms must be			
completed	l by a graduate-level counsellor, counsellor-educator, or counselling su	pervisor. The		
	must be in a non-compliant relationship with you who knows you in you	ır capacity as a		
counsello	within the past ten years.			

6. Attestation: Please read carefully for in	mportant information regarding your application		
knowledge and belief. I understand that the how my application satisfies the required consideration by the Registrar. I will practivalid criminal records check with vulnerab submit one to CCPA shortly. I understand and Psychotherapy Association does not impractitioner, I do so at my own risk. I herely arise from any decisions to practice private	s application is accurate and complete to the best of my e outcome of my application depends upon my demonstration of criteria, including presenting relevant coursework in Section 3 for ce in accordance with CCPA's Code of Ethics. I have included a le sector screening conducted within the last 12 months or will that any certification granted to me by the Canadian Counselling n and of itself specify licensure to practice counselling for a fee, tification by CCPA and practice counselling as a private by release CCPA from any and all liability and/or claim that may ely as a Canadian Certified Counsellor. For research and my participation in this process may be used in an		
I understand that all material becomes the property of CCPA upon receipt and that the official versions of my transcript and vulnerable sector criminal record check will be destroyed 12 months after I receive the Registrar's outcome. If I want these documents back, I understand that I must request to have them sent free of charge prior to the end of this timeframe.			
*Applicant signature:	*Date:		
Payment can be made online by logging into the Member Portal or by completing the application form and returning with payment information below. The total cost for certification is \$170 (\$95 for application plus \$75 annual fee). The \$75 annual fee will be reimbursed if your application is not granted CCC. Credit Card #			
(Accepted methods: VISA, MASTERCARD, AME	RICAN EXPRESS)		
Expiry Date (MM/YY)	CVD		

Please send the form by Mail/Fax/Email to:
Canadian Counselling and Psychotherapy Association
202 - 245 Menten Place
Ottawa, ON, K2H 9E8
Fax: 613-237-9786

Card Holder's Name

E-Mail: certification@ccpa-accp.ca