CANADIAN COUNSELLING AND PSYCHOTHERAPY ASSOCIATION
L'ASSOCIATION CANADIENNE DE COUNSELING ET DE PSYCHOTHÉRA

B.C. Chapter, Canadian Counselling & Psychotherapy Association
Section de la C.B., L'Association canadienne de counselling et de psychotherapie

Canadian Counselling & Psychotherapy Association, BC Chapter

Bev Abbey Service Award
Application

Type or print all information

Name M_____ _____ Student No. _____

Surname Given CCA Member No. _____

Home Address _____

_____ Postal Code _____

Email: _____ Telephone No. _____

Present Degree Program _____ Department _____

Semester of Entry to this Degree Program _____

Institution _____

- I declare all information provided by me in this application to be true and agree to abide by the Terms of Reference of this Award if my application is approved.

- Freedom of Information and Protection of Privacy Notice: The information on this form and all supporting documents is collected under the authority of the BC Chapter of the CCPA. The information is needed to adjudicate the Bev Abbey Service Award competition and will be used to determine the most suitable candidate for the Award. (If you have any questions about the collection and use of this information, please contact **Siri Brown** at **bc.chapter.ccpa@gmail.com**.

_____ _____

Applicant Signature Date

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Bev Abbey Service Award
Application (page 2)

Please provide one single-spaced, typewritten page (using 1.5'' margins and a 12 point font) describing your contribution to the counselling profession in BC in the year prior to your application, in a community, university, practicum or other relevant setting. Examples of such contributions include active volunteer involvement or representation in counselling-related initiatives, events, projects or programs. Your description should mention all past and present engagements and responsibilities, as well as any other volunteer award(s) held.

Please also provide the name of the person you have chosen as your referee. This person must complete the attached Referee Form and a confidential reference letter in support of your application. The Referee Form and reference letter must be sent directly from the referee to **Siri Brown** via email at **bc.chapter.ccpa@gmail.com**.

Name	Institution	Phone No.
_____	_____	_____

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Canadian Counselling & Psychotherapy Association, BC Chapter

Bev Abbey Service Award
Referee Form

To Referee:

Please complete this form, and prepare a confidential reference letter in which you comment on the applicant's demonstration of the following:

- Contribution to the counselling profession in BC in the year prior to his/her application, in a community, university, practicum or other relevant setting. Examples of such contributions include active volunteer involvement or representation in counselling-related initiatives, events, projects or programs.
- Participation in the BC Chapter, CCPA (if relevant to student's application).

Name of Applicant:

_____

I have known the applicant for ____ years, in my capacity as

_____.

Name of Referee _____

Institution _____

Position _____

Signature of Referee _____

Date _____

Please email both the completed form and reference letter directly to Siri Brown (bc.chapter.ccpa@gmail.com) by March 15, 2017.