



Canadian Certified Counsellor - Supervisor (CCC-S) Annual Renewal Form

Please note that you must hold the designation of CCC in order to apply for renewal of your supervisor certification

NOTE: INCOMPLETE FORMS WILL NOT BE PROCESSED

1. Applicant Information		
Last Name: _____	First Name: _____	CCPA Member ID: _____
Address: _____		
City, Prov/Terr: _____	Postal code: _____	E-Mail: _____
Tel (H): _____	Tel (W): _____	Fax: _____
2. Documentation		
The following documents <u>MUST BE ATTACHED</u> to this application:		
<ul style="list-style-type: none">• A brief summary of the nature of supervision provided over the previous year (12 hours required) including log of dates; duration of sessions; supervisee status (graduate student or post-degree supervisee); and supervisee practice setting (e.g., school, college/university counselling centre, community mental health clinic, private practice).• Provide evidence of completion of continuing education requirements. Each year, certified supervisors must complete 4 CECs in the area of supervision. These CECs will count towards the 36 CECs required to renew the CCC certification.		
3. Declarations		
<ul style="list-style-type: none">• I confirm that I possess professional liability insurance.• I confirm that I have read, understand and am committed to practising in accordance with CCPA's <i>Code of Ethics</i> and <i>Standards of Practice for Counsellors</i>.• I confirm I will adhere to CCPA's <i>Code of Ethics</i> and <i>Standards of Practice</i>, particularly boundaries of competence as a supervisor with respect to supervisees' areas of practice and treatment modalities utilized.• I certify that all information contained in, or referenced by, this CCC-S renewal application is complete and accurate and is not false or misleading.		
_____ Signature		_____ Date