

SUPERVISION TRAINING – Saturday 26th – Sunday 27th March 2011

**Venue:- Nottingham Natural Health Centre,
354 Mansfield Road, Carrington, Nottingham**

MindWorks Therapy Training are presenting a 2-day weekend Seminar for training in Supervision.

The Course is independently accredited by the National Council of Psychotherapists (est. 1971).

This course aims to encourage delegates to identify their own skills as a supervisor both in their own field and **or** other therapeutic modalities, whether Hypnotherapy, Counselling, Coaching, or other forms of Psychotherapy and Complementary Therapy.

The course will cover the dynamics of the 3 main supervisory roles – face-to-face, group supervision, and telephone supervision.

The seminar aims to encourage delegates to develop an integrative approach to Supervisory practise which draws upon varying Supervisory modalities including (amongst others) Cognitive Behavioural and Person-Centred Approaches.

Other topics covered will include:-

- Roles of the Supervisor
- Aims of Supervision
- Issues arising from Supervision
- Setting Boundaries
- Models of Supervision
- Qualities for Effective Supervision

Application requirements

Candidates should *ideally* have at least 4 years clinical practise and be in Supervision. However, other applications which do not meet this criteria will be considered on an individual basis.

Cost

The total cost of the course including certification is £250.00. A £100 Cheque/Postal Order deposit is required to secure a place. **Balance of £150.00 to be paid at Seminar Registration.**

COMPLEMENTARY BUFFET LUNCH BOTH DAYS & REFRESHMENTS ARE PROVIDED

MINDWORKS THERAPY TRAINING
SUPERVISION TRAINING 26th/27th March 2011 - APPLICATION FORM

Full Name: _____

Address: _____

Post Code: _____

Contact Tel No's: _____ Date of Birth _____

Email Address _____

Relevant Qualifications/Experience:

Current Therapeutic Practise:

Length of Time in Practise: _____

We reserve the right not to admit to the course any person who, in the opinion of the tutor, would not be suitable for Supervision Training at this time.

Signed: _____

Date: _____

Please make Cheque/Postal Order payable to **JASON FLETCHER** and circle as appropriate below:-

I enclose Cheque/Postal Order for Deposit £100.00 or
Full Payment £250.00

Please return your completed form and cheque or Postal Order to the address below and we will contact you shortly :-

Mindworks Therapy Training, PO Box 7219, Heanor, Derbyshire DE75 9AG
WE ALWAYS CONTACT EVERY APPLICANT – PLEASE TELEPHONE 01773 761459
IF YOU HAVE NOT HEARD FROM US WITHIN 7 DAYS OF SENDING YOUR APPLICATION