



香港專業輔導協會

The Hong Kong Professional Counselling Association

c/o College of International Education, Hong Kong Baptist University (Shek Mun Campus), 8 On Muk Street, Shatin, N.T.

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Hong Kong Professional Counselling Association Certified Counsellor Application

Please read the information on the back page before completing this form

English Name : (Mr./Mrs./Ms./Miss/Dr./others _____)
_____ (Surname) (Given Names)

Chinese Name (if applicable) : _____

Mailing Address : _____

Email : _____

Telephone No. : Home _____ Mobile _____
Office _____ Fax _____

Working Organization : _____

Position : _____

Academic Qualification:

Qualification	Major	Institution	Date Awarded

Professional Experience:

Organization	Country/Region	Position	Nature	Date	
				From	To

Total number of years in *full-time* counseling work *after* you graduated from master degree: _____

Membership Category in HKPCA: Member / Associate Fellow / Fellow **Membership no. :** _____

Signature of Applicant: _____ **Date of Application:** _____

Program Contact hours and Practice hours filing form

PROGRAM CONTENTS (320 contact hours):

Include **only** your **relevant Master Degree courses**, and exclude all non-degree courses. If you have obtained more than one counseling degree, you must specify clearly which program the courses belong to. **Contact hours** are the actual hours required by each course in classroom, laboratory, tutorial, or seminar contact. Typically, the credit or unit hours of each course have a corresponding number of contact hours. If a course is relevant to *more than one domain*, you may place it under more than one domain, but the contact hours of this course should *not be double counted*, but be split between the domains.

Compulsory Domains:

Counseling Theories & Orientation (Please list the courses):

_____ Contact Hours

Helping Process & Skills (Please list the courses):

_____ Contact Hours

Other Domains (At least 3 out of 5):

Human Growth and Development (Please list the courses):

_____ Contact Hours

Social and Cultural Foundation (Please list the courses):

_____ Contact Hours

Measurement and Appraisal (Please list the courses):

_____ Contact Hours

Program Evaluation (Please list the courses):

_____ Contact Hours

Group Work (Please list the courses):

_____ Contact Hours

Total: _____ Contact Hours

SUPERVISED PRACTICE (450 hours) and SUPERVISION (100 hours)

For Before Graduation: Include **only** supervised counseling practice and supervision **during and as part of** your relevant counseling-related **Master Degree** programs, i.e., only those hours **required and recognized** by the master's degree. **Exclude** any counseling work hours **before you began** your master's degree program. List clearly supervision **hours** and supervision **format** (*group* hours or *individual* hours separately).

For After Graduation: Include **only** the supervised professional counseling practice and supervision hours **after you are awarded your master's degree**.

Before graduation:

Period of Service	Agency/Unit	Nature of Service	Contact Hours	Name of Supervisor	Supervision Hours	Supervision format

Total: _____

Total: _____

After graduation (at least 150 practice hours and 50 supervision hours):

Period of Service	Agency/Unit	Nature of Service	Contact Hours	Name of Supervisor	Supervision Hours	Supervision format

Total: _____

Total: _____

Notes:

1. Read the “HKPCA Certified Counselor” brochure carefully for details about **educational and practice requirements**.
2. For academic and professional qualifications, submit photocopies of **certificates, transcripts and other documents (e.g. CV)** as evidence.
If the institution granting the qualification is outside Hong Kong, provide details such as course descriptions, graduation requirements or award specifications.
3. Submit a cheque of **HK\$500 as non-refundable application fee**, which will include first year of certification fee if your application is approved. Make the cheque crossed and payable to “The Hong Kong Professional Counselling Association Limited”.
4. Applicants must be a HKPCA Member, Associate Fellow, or Fellow with no unpaid membership fees.

Official Use Only

Application approved

not approved

Approved as Candidate

Certification Number : _____

Effective Date : _____

Receipt Number : _____

Notification Date : _____