



Psychotherapy & Counselling  
Federation of Australia

### APPLICATION FOR ASSOCIATION MEMBERSHIP

Professional associations in the field of Psychotherapy and Counselling wishing to become members of PACFA are asked to complete the details below and return the form, with **all** supporting documentation to:

**PACFA**

290 Park Street,  
North Fitzroy VIC 3068

**OR** via email:  
[admin@pacfa.org.au](mailto:admin@pacfa.org.au)

**Please include the non-refundable application fee of \$550.00 (including GST) payable by:**

**Cheque made out to PACFA:**      **Yes**      **Direct deposit to PACFA’s account:**      **Yes**  
ANZ Carlton North  
PACFA  
BSB: 013-374  
A/C: 4919-78993  
**Reference:** Organisation name

**NB:** If submitting hard copies, please supply the requested number of copies of all documentation. If you are able to supply the information in electronic format, please send one hard copy and a copy of documents in electronic format. Please **do not** reproduce this form or put into a presentation folder.

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#### PART A: ABOUT THE ASSOCIATION

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<b>Association name:</b>						
<b>Postal address:</b>						
	<b>Suburb:</b>		<b>State:</b>		<b>Postcode:</b>	
<b>Contact name:</b>					<b>Title:</b>	
<b>Position:</b>						
<b>Telephone:</b>	(    )	<b>Mobile:</b>				
<b>Email:</b>						

**Name of PACFA Member Associations (2) supporting this application:**


- ◆ If supplying hard copies only, please enclose **two** copies of the association’s Constitution or Articles of Association and Certificate of Incorporation, as well as **seven** copies of any brochures or leaflets that describe the association. If supplying documents electronically, please send one hard copy and one electronically.

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**PART B: YOUR ASSOCIATION’S MEMBERSHIP CRITERIA**

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Associations applying for PACFA membership need to demonstrate that their admission criteria for full members accord with the PACFA Training Standards document. This should be presented in a detailed document outlining membership requirements. The association should also complete the following brief document indicating how the key criteria below are met by the association. Together with the summary description of these criteria in the spaces provided below, please indicate where (in the documentation you have forwarded to us) each criteria is covered. For example, having stated that your association requires 200 hours of training for full members (1.1 below), you might add (Cf. enclosed “Training Document”, page 7, 3.2.2).

- 1.1 Applicants should have successfully completed an *integrated training program* appropriate to the specific modality, which comprises at least *200 hours of training over a minimum of two years*. (Accumulation of basic workshops not acceptable)

- 1.2 Teaching methods should contain a substantial component of *experiential activities* (normally 100 hours).

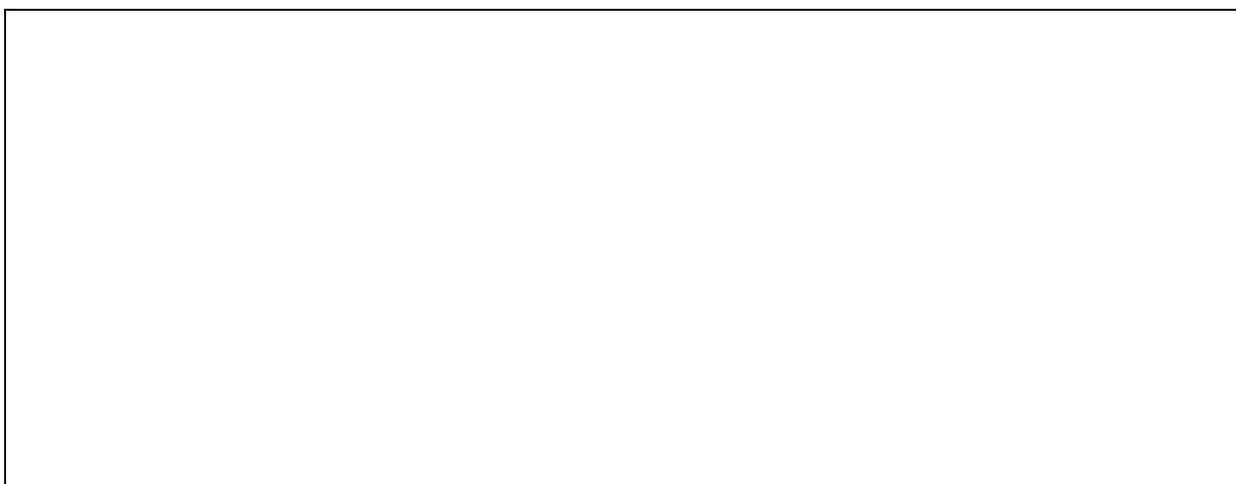
- 1.3 The training program should have included appropriate *assessment of knowledge of theory and practice of clinical skills*.



- 1.4 Applicants should have completed *50 hours of supervision* during or after the training program.



- 1.5 Directors of the training program completed by applicants should have qualifications at least to the level of training being conducted, have at least 5 years' experience and be eligible for membership of a professional body relevant to their qualification.



2. Please list all the membership categories in your association (associate member, clinical member, fellow etc) and how many there are in each category.

**Name of membership category**

**Number of members**

1.

2.

3.

4.

3. Which of these membership categories require training at or above the level specified in PACFA's Training Standards document?

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4. When were the current membership criteria for each of these categories listed in 3 (above) adopted?

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5. How many members in each category requiring training at or above PACFA’s minimum standards would have entered that category under earlier membership criteria that might not have met PACFA’s standards?

**Category**

**Number of members**

6. If the membership criteria for any of these categories have changed in the last two years, please describe briefly the changes made.

- ◆ If submitting hard copies, please submit **five** copies of the training document with your application form, or a document that specifies what training standards are required for full membership of your association. If submitting electronically, please send one hard copy and one electronically.
- ◆ Please enclose **five** copies of all documents that describe the membership criteria for the association, including application forms. (electronic copies as above)
- ◆ Please attach a statement that describes the procedure followed when a new application for membership is received, and any appeals process.

This statement should include a description of the documentation required to support an application, and the means by which the decision is made as to whether the applicant has met the necessary requirements.

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**PART C: CODE OF ETHICS**

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1. If you consider that your association's Code of Ethics either:
- does not address issues covered in PACFA's Ethical Guidelines document
- OR**
- is in any way contradictory of PACFA's Ethical Guidelines

then please attach a copy of a statement indicating the details and any action your association is planning to take to bring your code of ethics in line with PACFA's guidelines. This statement should indicate a willingness by the association to make any changes required to cover points not already included, and a reasonable time line for doing so.

2. Please attach a copy of a statement indicating the mechanisms in place in your association for
- Bringing to the attention of members the need to comply with the code of ethics (ie. copy of ethics is sent to members when they join the association)
  - Responding to and investigating any concern or complaint about a member's compliance with the Code of Ethics
  - Processes and sanctions available under the Constitution or otherwise adopted by the association for taking action against any member found to have breached the Code of Ethics
- ◆ Please attach to your statement **three** copies of any policy document that outlines these processes. (Electronic copies as above).
  - ◆ Please enclose **three** copies of PACFA's Ethical Guidelines with a notation beside each point referring to the clause in the associations code of ethics which covers that point
  - ◆ Please attach three copies of your association's Code of Ethics

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**PART D: DECLARATION**

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I confirm that the information given in this questionnaire and in accompanying documentation is a full and accurate description of the relevant aspects of

**(name of applicant association)**

**Signed:**

**Date:**

**Position in association:**