37 Mapesbury Rd, London NW2 4HJ

 +44 020 8452 9823

 pdtraining@bpf-psychotherapy.org.uk

The Clinical Qualification in Psychodynamic Psychotherapy (PD training)

*Leading to membership of The bpf, and registration with the British Psychoanalytic Council (BPC)*

**The Clinical Qualification in Psychodynamic Psychotherapy (PD training)** course for those who wish to apply for clinical training in once-weekly psychodynamic psychotherapy.

**There are two routes to qualification – the full training and the Modified Entry Scheme (MES)**

* For full training, the lead-in to Year 2 of PD training is from the Foundation Course. Details and application forms are on *The bpf* website. To progress onto Year 2, you will need to have completed both the theory and clinical modules of the Foundation Course. You will also need to fulfil the entry criteria for direct entry into Year 2, as detailed on *The bpf* website.
* The MES route is for those who already have completed a foundation course elsewhere. You will need to demonstrate that your previous course was psychodynamic, psychanalytic, or Jungian analytic in nature, with a taught element for clinical seminars and counselling or counselling-related experience in a professional or voluntary capacity.

Information for Applicants

Applicants should have acquainted themselves with the details of the training and its two routes of entry, as outlined above and on the course pages of *The bpf*website.

Where relevant you will have investigated whether the Foundation Course or MES route is appropriate for you. The final decision on this will be made in conjunction with the Course Director, following the selection interviews.

The information that you are asked to provide on this form is highly confidential. You are asked to disclose sensitive personal information which will not in itself prejudice your application. Selection of applicants for the training is based on all aspects of personal and professional suitability for the demands of once-weekly psychodynamic work.

Successful completion of the training leads to membership of the *bpf*, and to registration with the BPC as a clinical practitioner in work with adults.

Submission

Please submit your completed application form (as a Word doc) via email to the PD Training Coordinator at: **pdtraining@bpf-psychotherapy.org.uk** and complete the [**online payment of the application fee - £170 (Click here to make a payment).**](https://www.britishpsychotherapyfoundation.org.uk/civicrm/contribute/transact/?reset=1&id=99) If no interviews are offered, your application fee will be returned.

Your completed application will be considered along with your two references and, where applicable, confirmation from your therapist/analyst regarding the details of your personal therapy and their agreement to continue as a training therapist. Please note: training therapists have to be BPC registered psychoanalytic or Jungian analytic psychotherapists, 5 years post-qualification.

One (or sometimes two) interviews may be offered.

Submission of an application form and any subsequent interviews offered do not constitute an offer of acceptance onto the PD Training programme.

Following the interviews, the PD Training Committee will inform you if your application has been successful. If you are unsuccessful, you will be offered the opportunity to have clear feedback and to discuss the reasons. Where appropriate you will be given guidance about necessary further preparation if you wish to re-apply. Please note, the PD Training Selection Panel will consider each applicant’s preferred route, however, the final decision will be made by the panel in discussion with the applicant.

**The Closing Date for PD Training applications is 28th June 2025, to start in Sept/Oct 2025.**

\*We advise early submission of application forms, as spaces on this course are limited.

Please complete all sections of the application form, which begins on the following page.

**PD TRAINING APPLICATION FORM**

1. Personal Information

|  |  |
| --- | --- |
| Title: (Mr/Ms/other) |  |
| First name: |  |
| Surname: (block capitals) |  |
| Address: |  |
| Postcode: |  |
| Telephone number: | Home: |  |
| Work: |  |
| Mobile: |  |
| E-mail address: |  |

2. Personal analysis or psychotherapy\*

\*Please note: *The bpf* regards personal psychotherapy/analysis as strictly confidential and in line with this, personal therapy undertaken during training remains a ‘non reporting therapy’. However, for applicants who are required to be in therapy during their training,we will contact your therapist /analyst at the point of application asking for confirmation that they have agreed to be your training therapist and confirm the details that you have provided are correct. Once accepted onto the training an annual letter will be sent out to training therapists/analysts for confirmation that the therapy is ongoing at the required minimum frequency.

**Individual therapy (please list all)**

**Current**

Date started:

Name of therapist:

Number of times a week:

Address:

Telephone:

**Previous (including Group Therapy) where applicable:**

Date started: Date ended:

Name of therapist:

Number of times a week:

3. Education and Academic Qualifications

**‘A’ levels (or equivalent) qualifications**

|  |  |  |  |
| --- | --- | --- | --- |
| School/College Name | Subject | Grade | Date started/completed |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Other qualifications (i.e. academic, professional qualifications or attainments)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Degrees/Diplomas | Subject | Date started/completed | Awarding Institute  | Class |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Psychotherapy Training/s**

Give details of all training:

|  |  |  |
| --- | --- | --- |
| Qualification | Date started/completed | Awarding body |
|  |  |  |
|  |  |  |
|  |  |  |

**Infant Observation (if completed)**

|  |  |  |
| --- | --- | --- |
| Institution  | Date started/completed  | Name of seminar leader  |
|  |  |  |
|  |  |  |

**Professional Organisations** (include details of professional organisations or accredited bodies you are currently a member of)

|  |  |
| --- | --- |
| Organisation/professional body: | Date joined |
|  |  |
|  |  |
|  |  |

**Research and Publications**

|  |
| --- |
|  |

For those wishing to be considered for the modified entry route (MES), please fill in the following details about your previous psychotherapy qualification/s:

In your original, or subsequent training(s), can you let us know to the best of your ability, how many hours of theory seminars, if any, did your course provide of the following areas of study:

Freud (Early, Middle, Late)

Jung (Early, Middle, Late)

Klein

Post Kleinian

Winnicott

Independent Group

British Object Relations

Was there a taught element for clinical seminars? If so, how many hours and what topic areas were covered?

|  |
| --- |
|  |

4. Past and Present Employment and Work Experience

Please list in reverse order from the present: (continue on a separate sheet if necessary)

|  |  |  |  |
| --- | --- | --- | --- |
| Job title: | Employer name | Function and duties: | Dates employed from/to |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

5. Experience of counselling (or counselling-related) roles in a voluntary or professional capacity

Please give full details of the nature of the experience, including time spent, experience gained and the name of the setting, with dates.

|  |
| --- |
|  |

Note: Professionals working in a mental health setting involving psychiatric experience need not answer this question.

6. Other relevant experience

Give details of other relevant experience with adults including voluntary work, psychotherapy, or counselling placements.

|  |
| --- |
|  |

7. Please give a short account of your life, including childhood, family background, education and other significant experience.

500 words maximum.

|  |
| --- |
|  |

8. Why do you wish to train?

Say in about 500 words why you wish to train and indicate which route you would like to be considered for.

|  |
| --- |
|  |

8.a. Previous applications to train

Please describe any previous applications for psychodynamic training of any kind which have resulted in a reconsideration on your part, or a rejection by the institution.

|  |
| --- |
|  |

9. Other personal Information

Please write about anything you think relevant to your application, and which is not covered in the previous questions, such as health issues including any psychiatric treatment, hospital admissions, family circumstances. *The bpf* has an Equal Opportunities policy, and this information will not prejudice your application in any way.

|  |
| --- |
|  |

10. How did you hear about the training?

|  |
| --- |
|  |

11. References

Give the details of two referees. At least one should be well acquainted with your professional and/or voluntary work. Neither should be a personal friend or family member.

1. Name:

Connection to applicant:

Address:

Telephone:

E-mail:

1. Name:

Connection to applicant:

Address:

Telephone:

E-mail:

**Please sign the following declaration (a digital or typed signature is acceptable).**

**I understand that:**

**a) Completion of this form does not form any commitment between me and** **the** *bpf* **at this stage**

**b) All the information given on the form will be held by the** *bpf***in the strictest confidence, in accordance with** [the *bpf* privacy policy](https://www.britishpsychotherapyfoundation.org.uk/policies-procedures/privacy-statement/)***.***

**Print name:**

**Signature: Date:**

Disclosure and Barring Service (DBS) check

If you are offered a place on the training, you will be required to have an enhanced DBS certificate with the *bpf*as the named organisation. Currently the cost of this certificate is £68.50, which must be covered by the trainee. This charge is subject to change by the issuing service.

Verification of documents

When offered a place, MES applicants will be asked to provide documentation confirming their professional training and qualifications, membership to professional organisations and professional insurance.

Cancellation

All cancellations must be made in writing and subject to an admin fee of £25

100% refund will be given for cancellations up to 60 days before the course start date.

50% refund will be given for cancellations up to 30 days before the course start date.

No refund for cancellations received in less than 30 days before the course start date.