



Irish Association for Counselling and Psychotherapy

# Supervisor's Report for IACP Annual Re-Accreditation

**1. PERSONAL DETAILS OF THE APPLICANT**

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Membership No: \_\_\_\_\_

**2. SUPERVISOR'S REPORT**  
 To be completed by your Supervisor If you have more than one supervisor, please photocopy this page as necessary.

Name of Supervisor: \_\_\_\_\_

Supervisor Accrediting Body & Membership Number: \_\_\_\_\_

Date and period of current Supervisor Accreditation: from (dd/mm/yy): \_\_\_\_\_ to (dd/mm/yy): \_\_\_\_\_

Address: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Start of Supervision contract (dd/mm/yy): \_\_\_\_\_ End of Supervision contract (dd/mm/yy) or Current: \_\_\_\_\_

Number of hours of supervision with applicant in the last 12 months: Individual: \_\_\_\_\_ Group: \_\_\_\_\_ Peer (Supervision): \_\_\_\_\_

Frequency of Supervision: Fortnightly  Monthly  Other \_\_\_\_\_

Length of group supervision sessions: \_\_\_\_\_ Number of supervisees in group: \_\_\_\_\_

Total number of client hours declared by the Supervisee completed within their re-accreditation year: \_\_\_\_\_

Does this supervisee occupy other significant roles in your life?  Yes  No

If Yes please explain: \_\_\_\_\_

I recommend the renewal of the applicants IACP Accreditation:  Yes  No

If No please state reason: \_\_\_\_\_

Additional comments: \_\_\_\_\_

Signature of Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

**3. CPD REQUIREMENTS**

I confirm that I have seen and signed off my supervisee's Annual CPD Log and supervisee has completed the required 30 hours of CPD activities that relate to counselling /psychotherapy (10 hours directly related to supervision for Supervisor Members).

I am satisfied that the activities have contributed to the professional development of the applicant.

Signature of Supervisor: \_\_\_\_\_ Date: \_\_\_\_\_

Documents will be destroyed after an appropriate period of time as per the IACP Retention policy. Do not send any original documents unless specifically requested. Keep a copy of any application forms/correspondence you send to IACP for your own records.