



MOUNT JOY COLLEGE APPLICATION FORM

Level I Training in Hope Alive Group Counseling

Personal Information:

Name (Title, First, Last): _____

Home Address:

Street Address

City/Town

State/Province

Country

Postal Code

() _____ () _____

Home Phone Number

Home Fax Number

E Mail Address

Work Address:

Company Name: _____ Your Title _____ Department _____

Street Address

City/Town

State/Province

Country

Postal Code

() _____ () _____

Phone Number with Extension

Work Fax Number

Work E Mail Address

You may contact me at my work address/phone/fax/E-mail. Yes _____ No _____

Marital Status: _____ # of Children _____ Date of Birth: _____

Religious

Affiliation: _____ Denomination _____

Level of Education completed:

Experience and training in counseling:

*** Briefly describe yourself. Enclose a one page, handwritten letter describing yourself and your reasons for taking this course.

For how long do you commit yourself to doing Hope Alive group counseling?

Describe your health.

Are you presently taking any medications? Which and for what reasons?

Describe your interest in this training as well as any concerns or reservations.

What is your intended use of this training? Check 2 only.

- | | |
|---|---|
| <input type="checkbox"/> My own personal therapy | <input type="checkbox"/> refresher to earlier Hope Alive program. Date: |
| <input type="checkbox"/> Better theoretical understanding | <input type="checkbox"/> personal maturing |
| <input type="checkbox"/> Use whole program | <input type="checkbox"/> individual counseling |
| <input type="checkbox"/> Use parts in my practice | <input type="checkbox"/> other. Explain: |

From your perspective, what are the essentials in counseling for healing:

Have you ever been convicted of a crime? _____ Yes _____ No

If yes, explain:

Have you ever been convicted of a sexual offense? _____ Yes _____ No

If yes, explain:

Please list your spiritual experiences, Christian and non Christian.

Have you had previous Hope Alive counseling Yes _____ No _____ Hope Alive training? Yes _____ No _____

Date and location of training and/or counseling:

Enclose names of two individuals willing to give you referral references. Please include phone numbers.

1. Name (Title, First, Last): _____

Home Address:

Street Address

City/Town _____ State/Province _____ Country _____ Postal Code _____
() _____ () _____
Home Phone Number _____ Home Fax Number _____ E Mail Address _____

2. Name (Title, First, Last): _____
Home Address: _____

Street Address _____
City/Town _____ State/Province _____ Country _____ Postal Code _____
() _____ () _____
Home Phone Number _____ Home Fax Number _____ E Mail Address _____

Following counseling training, when/if invited to take the Hope Alive training examination, I will use the Hope Alive program as a whole, not in part or melded with other programs. I will use the Hope Alive group counseling method only on completion of the appropriate training, passing the examination, and after gaining the necessary credentials and certification.

SIGNED _____

Dates and Tuition Information:

Hope Alive Level I course: Oct 28th to Nov 4th, 2018

Sunday Dinner to Sunday Lunchtime

Location: Priest For Life Headquarters ,

St. Stephen's Retreat Center in Titusville, FL

(Nearest airport is Orlando International Airport)

Host: Janet Morana, Executive Director of Priests For Life,
a certified Hope Alive Counselor

Accommodation Fee: \$800.00 which includes 7 nights stay
plus three meals per day and snacks.

Tuition Fee: \$300 USD for the Training Course.

You are responsible for booking your own air travel.

For those living locally to the Titusville area costs are \$50.00 per day
for meals for a total of \$350.00 for the week, plus \$300.00 tuition.

Handwritten letter: Yes ____ No _____enclosed.

**Please keep a copy of this application for your records
and send the original to: mountjoy@islandnet.com**

**Mount Joy College, PO Box 27103, Victoria, BC V9B 5S4, CANADA
Telephone: (250) 642-2844 or Fax: (250) 642-1841
E-mail a copy of the application to: admin@mtjoycollege.com**

You will be notified as to the acceptance of your application either by E-mail with accompanying information regarding the location of the venue for the training.

Since the program is a Christian mission, before obtaining your certificate to practice, you will be asked to sign and adhere to: the Commitment of Professional Conduct, My Declaration for Life Ethical Statement and the Mount Joy Statement of Faith. We recommend you read these before applying. They can be downloaded from: www.mtjoycollege.com website.