School of PsychologyDECAP Application (Sample)

Doctorate in Educational, Child & Adolescent Psychology Course Application

Application Guidance

Before you begin:

This form must be completed in one sitting. You can navigate back through completed sections at any time, without losing information, provided you do not close or navigate away from the form.

It is recommended that you complete long answers, such as your personal statement, in a word-processing application then paste them into this form. There is a system limit of 4,000 characters for any text box, and some questions may impose a word limit.

Please read the accompanying guidance which can be found here, along with a completed example form: https://www.qub.ac.uk/schools/psy/Study/PostgraduateTaughtCourses/DECAP/ApplyingtoDECAP/

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This form is divided as follows and is expected to take up to 2 hours to complete:

- 1. Application Form
 - Personal, Contact and Additional Details
 - Graduate Basis for Chartered Status
 - Qualifications
 - Relevant Experience
 - Personal Statement and Self-Reflection
 - Referees
- 2. Equal Opportunities Monitoring Form
- 3. Disability Awareness Form (optional)
- 4. Agreement and Form Submission

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* Required		
Personal Details	С) (i)
1. Title * □,		
Ms		
2. Surname * 🗔		
Example		
3. Previous Surname (1) If you have previously been known by a different surname, enter it here.		
Enter your answer		
4. Forename(s) * \square		
Anne		
5. Date of Birth * 🗔		
01/01/1980	<u> </u>	3
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Contact Details		
6. Permanent Address *		
1 Mystreet Bramble Way Littletown MY1 1EG		
7. Correspondence Address (4) If you use a different address for correspondence, enter it here.		
Enter your answer		
8. Telephone Number * [7] Enter a number we can reach you on, such as your mobile.		
01 2345 6789		
0.5		
9. Email Address * 🗔		
anne@example.com		
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Additional Details	C
10. National Insurance Number * 🗔	
NI123456	
11. Country of Birth * 🗔	
France	
12. Nationality * 🗔	
Spanish	
13. Country of Domicile * 🗔	
Austria	
14. Do you need a work permit to work in Northern Ireland? * 🗔	
○ Yes	
No	
15. Do you hold a current driving licence? *	is
Yes, full licence	
Yes, provisional licence	
○ No	
16. Do you have access to a form of personal transport? * 🗔	
Yes	
○ No	

17. Previous Student Number (La)		
	If you have previously been a student of QUB and you know your studen	nt number, please enter it here.
	Enter your answer	
18. Is there any known reason you are not suitable to work with children? * 🖂		
	○ Yes	
	No	
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Qualifications		
See guidance 1.1.1.		
9. A-Levels * 🗔 Please chronologically list all A-Level or equivalent qualifications in the	e format: Date Awarded, Awarding Institution, Subject, Grade	
1/8/2005, EDU, Maths, A 1/8/2006, EDU, English, B 1/8/2006, EDU, Geography, B		
20. Higher Education 🗔 Please list obtained degree(s) in the format: Date Awarded, Awarding In marks and details of any distinctions.	nstitution, Course, Classification. Please also list assessed module	
1/8/2010, University of Examples, BSc Psychology, 2:1 - Advanced Psychology: 64 - Human Behaviour: 67 - Distinction in Experimental Methods		
21. Professional Qualifications Please list details of any professional qualifications awarded to you, inc. 1/8/2011, Certificate of Psychology Studies, Institute of Exa		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
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Graduate Basis for Chartered Status of the British Psychological Society	-(1)
See guidance 1.1.1.	
2. Please indicate your eligibility for chartered status *	
I am currently eligible for the Graduate Basis for Chartered Status I will be eligible on completion of my studies	

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I am awaiting the decision of the BPS as to whether I am eligible

* Required

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K	Relevant Experience	□(4)
Se	See guidance 1.1.2 and 1.2.2.	
Α	Applicants must demonstrate that they have a minimum of 2 years (2,000 h	nours) relevant experience.
23	3. Relevant Experience *	the organisation, the nature of the work, dates to and from, and
	Assistant in the Institute of Examples, January 2012 - December conducted surveys and provided consultation. 550 hours.	per 2012. Assisted therapists with data analysis,
	Junior Therapist in the Example Organisation, January 2014 - mental health care. 1,800 hours.	March 2016. Assisted senior therapists in delivering
2/	1 Total Hours of Evperience *	
24. Total Hours of Experience * Please give the combined total of all hours of experience from the above list.		
2,350		
25.	5. Sick Leave * 🗔	
How many days have you been absent from work or study in the past 2 years?		
	5	
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Personal Statement and Self-Reflection

See guidance 1.2.3.

It may be useful to type your statement in a word-processing application, then copy and paste it. Your response must not exceed 750 words.

26. Personal Statement and Self-Reflection * 🛄

Text fields have a maximum length of 4,000 characters each. If you need to, you can use the continuation field, but do not exceed 750 words in total.

Lorem ipsum odor amet, consectetuer adipiscing elit. In himenaeos finibus adipiscing metus efficitur torquent dis. Fames habitant quam praesent id dictum. Id nibh vivamus dignissim viverra placerat magna suscipit. Parturient turpis taciti; bibendum nullam suscipit senectus rhoncus? Arcu lacus efficitur vel felis dignissim mauris mi volutpat nam. Habitant lorem lobortis rhoncus sagittis; ante arcu. Egestas parturient porttitor luctus lobortis eu.

Faucibus dapibus lobortis natoque per phasellus etiam. Viverra aptent tristique commodo pretium arcu; dis senectus. Sapien sed iaculis malesuada condimentum ornare justo euismod tempus purus. Lorem etiam vulputate, ut tristique aptent molestie aptent odio. Adipiscing torquent praesent ullamcorper fusce; in auctor feugiat adipiscing sed. Aliquam rutrum mollis facilisi morbi scelerisque. Efficitur lacinia in tellus tempor erat aenean placerat. Lacus facilisis platea nibh netus aliquam penatibus. Porttitor placerat suspendisse, pretium magnis dictumst porttitor. Praesent nisl aliquam vulputate facilisis, porttitor quam condimentum nec.

Penatibus congue felis per eleifend integer vestibulum. Commodo nostra euismod amet inceptos quis praesent proin ex proin. Lacinia duis ut eget vel venenatis feugiat metus lacus. Sagittis eget lectus non, dapibus penatibus egestas. Dignissim cursus taciti praesent sollicitudin sociosqu mattis amet quam? Porta erat a hendrerit vehicula, scelerisque justo ornare fermentum natoque. Aliquet lacus mauris eros sollicitudin fusce sit suscipit euismod.

27. Continuation [1]

Continuation of Personal Statement and Self-Reflection.

Ultricies quisque ultricies faucibus imperdiet consequat parturient sociosqu lacinia nec. Blandit libero venenatis est phasellus tristique praesent sapien, molestie quisque. Nam magna non pretium id ad; nec lobortis. Class vitae class mauris, libero vivamus cursus. Nec mattis mauris ad metus semper praesent nullam. Neque in euismod praesent viverra diam lacus habitasse.

Sit taciti inceptos porta vel mattis pulvinar euismod. Nostra gravida dui libero tempor et torquent cursus eu. Facilisi facilisi tortor ornare vel curabitur senectus augue. Conubia varius suspendisse congue vestibulum maecenas ipsum iaculis. Morbi est praesent ac litora semper non molestie. Id magnis arcu nam molestie mauris aenean nam nascetur? Ultrices montes tellus netus augue sapien.

28.	Word	Count *	

Please give the exact word count for your statement.

698

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Referees	
See guidance 1.3.	
You must provide contact details for 3 referees, one of whom must be from	n your last employment working with children or young people.
The selectors reserve the right to seek references from persons other than	those you have named.
29. Referee 1 (last employment working with children or young Include Position, Name, Address, Email and Telephone Number	g people) * 🗔
Senior Therapist Jane Jones 123 The Road TH3 4AD 01 2345 6789	
80. Referee 2 * ் பு Include Position, Name, Address, Email and Telephone Number	
Manager John Joe Institute of Examples 3 Some Street ST3 3RT 01 2345 6789	
31. Referee 3 * [7] Include Position, Name, Address, Email and Telephone Number Supervisor	
Jose Jacobs 1 Park Way PW1 1WY 01 2345 6789	
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End of Application Section

(4)

You have reached the end of the application section, but the form is not yet submitted. You must complete these additional forms before the submission stage:

- Equal Opportunities Monitoring Form
- Disability Awareness Form (Optional)

You can navigate back through completed sections at any time, without losing information, provided you do not close or navigate away from the form.