



APPLICATION FOR SAC REGISTERED CLINICAL SUPERVISOR (RCS)

Application for SAC Registered Clinical Supervisor (RCS) must be submitted electronically via email to admin@sacsingapore.org with the relevant supporting documents. SAC Secretariat will conduct the first round of review to ensure that all the documents submitted are in good order before it will be submitted to the Clinical Supervision Board (CSB) for evaluation. The entire process generally takes about one (1) month on average.

Select your current Membership Category:

- Fellow Member
Master Clinical Member
Clinical Member (Registered Counsellor)

Member ID: [input box]

Personal Information

Dr / Mr / Mrs / Ms / Miss / Mdm [input box] Full Name as per NRIC / Passport (Write name in BLOCK letters. Underline family name.)

Email: [input box]

Mobile No.: [input box] Office Tel. No.: [input box] Home Tel. No.: [input box]

Block / Street Name [input box] Unit No.: [input box]

Building (if any) [input box] Country [input box] Postal Code [input box]

Employer: [input box]

REQUIREMENTS

- A one-time non-refundable admin fee of SGD50.00 is applicable.
A Masters' degree in Counselling, Counselling Psychology, or similar field; demonstrated with a PDF transcript and certificate
The individual must possess at least three (3) years post SAC Registered Counsellor status
The individual must be a current SAC Registered Counsellor (RC) with membership fees paid up to date
The individual must have at least five (5) years of experience as a professional counsellor. This will be fulfilled in the clinical experience section below.
Minimum one thousand five hundred (1500) post-graduation Practice/Clinical Hours, of which at least fifty (50) hours were for the provision of supervision
Log-sheets and/or summary sheets endorsed by Head of Organisation or equivalent
Minimum one hundred (100) hours of supervision received post-graduation
Log-sheets to be endorsed by an SAC Registered Clinical Supervisor (RCS) OR SAC Registered Counsellor (RC)
Minimum fifty (50) hours of Training in Supervision
Certificate OR Letter of attendance for each workshop/course is required (PDF)
Possess a valid Professional Indemnity Insurance ("PI") coverage from your company or be insured under SAC's AIG Group Insurer (New Requirement w.e.f. March 2015 - Please see Article 5.5 of the SAC Constitution). You can also apply for exemption by completing an exemption form which is available upon request.



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CLINICAL EXPERIENCE

As it is a requirement for applicant to have **at least five (5) years** of clinical experience, please fill in this section clearly with your clinical experience clocked in the last five (5) years. Kindly state the specific number of hours for each year. Approximate hours are not allowed e.g. 10.33 hours. Please fill out the chart below:

Clinical Supervision	
Year	No. of hours

Group Counselling	
Year	No. of hours

Individual Counselling	
Year	No. of hours

Marriage & Family Counselling	
Year	No. of hours

Crisis/Hotline Counselling	
Year	No. of hours

INFORMATION VERIFIED BY:	
Name:	
Signature:	
Position:	
Date:	

SIGNATURE OF APPLICANT	
Date:	

Note: Please have your Supervisor, Director or an appropriate person within your organisation verify the details furnished in this application form

For Official Use	
Received by:	
Date received:	
Date submitted to Clinical Sup. Board:	
Date of approval:	
Approval status:	Approved / Not Approved