



Institute of Psychological Studies

Registered under the Tertiary and Vocational Education Commission (TVEC) Reg No. P01/0053.
Affiliated to International Buddhist Relief Organization in the UK (IBRO) UN.Reg NO.1049429
Affiliated to the Sri Lanka Association of Professional Counsellors and Psychotherapists (SLAPC)
No. 455, Galle Road, Colombo 03. Tel 0112555400, 077-3680930, 077-0410930
Email: ipsrilanka81@gmail.com / Website: www.ipsrilanka.lk

Higher Diploma in Counselling and Psychotherapy (Advanced psychotherapy & Research based Diploma program) Academic year -2024

Eligibility criteria: Students who have successfully completed the Diploma in Counselling and Psychotherapy at the Institute of Psychological Studies.

Course duration: 1-year

Time: 9.00am - 4.00pm

Medium: English/Sinhala

Course fee: Rs 180,000/= (Monthly Payment Rs.15, 000/=)

Registration fee: Rs. 20,000/-

Examination fee: Rs. 30,000/-

Bank Account details are as follows:

- Account Name: Institute of Psychological Studies
Account Number: 210100125623107
People's bank
Co-op house Branch Kollupitiya
- Account Name: Institute of Psychological Studies
Account Number:1000248959
Commercial bank
Kollupitiya.

Course content

1. Counselling Psychology
 - Exploration in counseling
 - Understanding in Counselling
 - Integration in Counselling
2. Counselling practice
 - Counselling skills practice
 - Written evaluation
3. Advanced Psychotherapy
4. Parapsychology
5. Counselling practice -100 hours
6. Research Methods
7. Dissertation

**Thanks & Best Regards,
Devni Bandara
Head of Administration
Tel: 0112555400 | 0770410930
Institute of Psychological Studies
Sri Lanka**



INSTITUTE OF PSYCHOLOGICAL STUDIES

No 455, Galle Road, Colombo 03. Tel.0112555400/0773680930/0770410930 web:ipssrilanka.lk

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Higher Diploma in Counselling & Psychotherapy

[Please Use Block Letters and Tick Appropriate Box as Necessary]

Full Name

Home Address

Telephone no (Home) (Mobile)

E-mail Address

Office Address

Office Tel no

Medium

Age Date of Birth / /

Sex Male Female Religion

District Electorate Province

Employment

Present Employment

Name of Dept. /Company / NGO

Nature of Duties

Employment History

Employment	From - To	Dept. / Company / NGO
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If you are selected to a University

Name of University

Faculty

Proposed year of Graduation

Degree

Have you completed any part of this one year Diploma in Counselling and Psychotherapy at the IPS?

Yes No

If Yes, Year Part

Student No Centre

If you are a University Graduate

Name of University	Country	Year	Name of Degree	Subjects
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If you have any educational/ professional Qualifications

Name of Professional Program/ Certificate	Duration	Country
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<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Whether it is accredited by any Professional Association? No

I hereby certify that the above particulars are true and correct, and furthermore, I agree to abide by all the present rules, regulations including examinations and future enforcements of the institute during my studentship attached to this institute.

Please find enclose an Application and,

M.O. Cash Cheque - Cheque No

For admission and for the, First Month Full Course Fees

Higher Diploma in Counselling & Psychotherapy (Part III)

Date

Signature