**Edinburgh University Staff Counselling Service - Registration Form**

**Please see our** [**Privacy Notice**](https://www.ed.ac.uk/counselling-services/staff/about-us/privacy-notice)

Office Use only

|  |  |  |  |
| --- | --- | --- | --- |
| Date |  | Ref. |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name |  | | | | | | | | | | | |
| Date of Birth |  | | | Age | |  | | | Gender | |  | |
| Staff Number |  | | | Nationality | | |  | | | | | |
| Do you consider yourself to have a disability? | | |  | | | | | | | | | |
| Please specify any requirements you have for adapted facilities or assistance. | | |  | | | | | | | | | |
| Home address | | |  | | | | | | | | | |
| GP name and address | | |  | | | | | | | | | |
| University College or Group |  | | | | | | | Length of Service | |  | | |
| What is your job title? |  | | | | | | | Permanent or Fixed term | |  | | |
| Location | Central area | KB | | | Little France | | | E. Bush | | | | Other |
| How did you hear about the Staff Counselling Service? | | | | | | | | | | | | |
| Have you been to the service before? | | | | | | | | | | | | |

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| --- | --- | --- | --- | --- |
| **Contact details:** Only include information that you agree to us using to contact you. An email address is preferable for appointment offers. We can accept a personal email address, however, using your University email ensures that your personal data is kept within the University’s secure computing environment. | | | | |
| Email address | |  | | |
| Telephone number |  | | Can we leave a voice message?  (we are unable to send texts) | **Y/N** |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Availability:** please delete times you are not available. Please note that if your availability is limited it is likely to take us longer to be able to offer you an appointment. | | | | | | | | |
| Tuesday | 9:00 | 10:15 | 12:00 | | 1:00 | | 2:00 | 3:15 |
| Thursday | 9:00 | 10:15 | 12:00 | |  | |  | |
| Friday | 9:00 | 10:15 | 11.30 | 12:00 | 12.45 | 1:00 | 2:00 | 3:15 |
|  | | | | | | | | |
| Are you able to take a cancellation appointment at short notice? | | | | | | | | Y/N |
| In order for us to offer a suitable appointment please let us know if there are any specific dates when you are unable to attend? | | | | | | | | |

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| --- |
| Is there any other relevant information that you would like us to know? |