

Federation of Drug and Alcohol Professionals



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Part of NAADAC - Registered charity no. 1075222

Insurance Form

For the protection of clients it is essential that practitioners are covered for professional liability. Those working in private practice or for organisations which do not cover their staff for professional liability should complete section one - even if this is only part of their work. Those working exclusively for an organisation which does cover its staff for professional liability cover should complete section two - this section must also be signed by the director of the service concerned.

Name:

Section One

[This section is for those working in private practice or for organisations which do not cover their staff for professional liability.]

[This section should be completed by the applicant.]

I confirm I hold Professional Liability Insurance for my practice as a therapist/counsellor and I will retain it during my period of accreditation with FDAP.

I attach a copy of my current insurance certificate, signed by my proposer to verify it is a true copy of the original.

Signature:

Date:

Section Two

[This section is for those working exclusively for organisations which do cover their staff for professional liability.]

[The first part of this section should be completed by the applicant.]

I confirm I am employed by the organisation mentioned below and I do not carry out any private work, in the event I do take private clients or set up my own practice during my period of accreditation with FDAP, I will obtain Professional Liability Insurance.

Signature:

Date:

[The following should be signed by the director of the service concerned.]

I the undersigned confirm that _____ as an employee of _____ is covered by us for professional liability.

Signature:

Position:

Date: