



Toronto Institute for Contemporary Psychoanalysis
Administration Office: 17 Saddletree Trail, Brampton, ON, L6X 4M5, Canada.
Tel/Fax: 416-288-8060 / Web: www.ticp.on.ca

ESSENTIALS OF PSYCHOANALYTIC PSYCHOTHERAPY PROGRAM **2011 - 2012**

Application Form

RETURN COMPLETED FORM TO:

Suzanne Pearen, Administrative Coordinator, TICP
17 Saddletree Trail
Brampton, Ontario L6X 4M5
Telephone: 416-288-8060 / Fax: 416-288-8060 / Email: suzanne_pearen@rogers.com

APPLICATION FEE: \$100.00 to be submitted with application. Make cheque payable to the "Toronto Institute for Contemporary Psychoanalysis".

APPLICATION DEADLINE: **May 1, 2011**

SURNAME: _____

GIVEN NAME(S): _____

Address (BUSINESS): _____

Business Telephone: _____

Address (HOME): _____

Home Telephone: _____

E-MAIL : _____

Preferred Mailing Address To: Business ~ or Home ~

PROFESSION: _____

UNIVERSITY DEGREES: _____

PROFESSIONAL QUALIFICATIONS _____

RELEVANT PROFESSIONAL PAPERS / CONTRIBUTIONS

Title	Publication/Conference	Date
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PREVIOUS TRAINING IN PSYCHOTHERAPY

Courses:

Supervision:

Societies, Professional Bodies of which you are a Member or Fellow.

REFERENCES

Provide the names and addresses of two individuals who have known you well in your professional work for at least two years. Please have them send a letter of reference at the time of your application, detailing their evaluation of your personal qualities and psychotherapeutic work.

Name / Address	Occupation	Period Known
1		
2		