

C.G. JUNG INSTITUTE OF COLORADO

APPLICATION FOR TRAINING IN JUNGIAN ANALYSIS

(add additional pages if necessary)

Materials to be sent to the Director of Admissions include:

1. The C.G. Jung Institute application form
2. Documentation from all of the applicant's analysts in the last five years, listing inclusive dates of analysis, total number of hours of analysis, total number of face-to-face sessions and total number of telecommunication (phone, Skype) sessions
3. Complete original transcripts, sent directly by the educational institution and with its official seal, from all college and graduate institutions attended
4. An autobiography, approximately 3 pages in length
5. Applicants who have applied and been accepted or denied admission to another IAAP training program should supply this information; and applicants requesting to transfer from another IAAP training program should provide a letter demonstrating good standing in that program
6. An application fee of \$450 (\$100 non-refundable and \$350 refundable if the individual withdraws from the admissions process one month before the scheduled interviews) made out to the C.G. Jung Institute of Colorado
7. A notarized copy of the "Waiver for Prospective Students."

Please direct all questions and requests, and send all application materials to:

Christine Chao
Director of Admissions, C.G. Jung Institute of Colorado
303-753-9738
chao.christine@gmail.com
1395 Dahlia Street, Denver, CO 80220-2450

PERSONAL

DATE OF APPLICATION:

NAME:

ADDRESS:

PERMANENT ADDRESS (if different)

HOME PHONE:

OFFICE PHONE:

CELL PHONE:

EMAIL ADDRESS:

DATE OF BIRTH:

PLACE OF BIRTH:

C.G. JUNG INSTITUTE OF COLORADO

EDUCATION (names of schools, places, dates and degrees)

ELEMENTARY:

HIGH SCHOOL:

COLLEGE:

GRADUATE AND PROFESSIONAL:

PSYCHOLOGICAL OR PSYCHIATRIC TRAINING AND EXPERIENCE INCLUDING
CGJIC STUDY GROUPS: (places and dates)

HAVE YOU PREVIOUSLY APPLIED TO THIS TRAINING PROGRAM? IF YES,
PROVIDE DATES OF APPLICATION:

HAVE YOU EVER APPLIED TO OR STUDIED AT ANOTHER JUNGIAN TRAINING
PROGRAM? IF YES, PLEASE PROVIDE PLACES AND DATES AND RETURN
RELEASE FORM:

PERSONAL ANALYSIS

NAME OF ANALYST (S):

ADDRESS:

DATES (from _ to _):

FREQUENCY OF SESSIONS:

TOTAL HOURS (specify f-to-f or telecommunication):

C.G. JUNG INSTITUTE OF COLORADO

EMPLOYMENT

EMPLOYMENT HISTORY (with pertinent dates. Enclose expanded curriculum vitae):

PRESENT OCCUPATION: