

**CONFIDENTIAL**

**APPLICATION** - to be completed **whether or not** you have previously applied to the Studies Programme, IGAP.

The Independent Group of Analytical Psychologists

**DOWNLOAD THIS FORM AND 'SAVE' TO YOUR DESKTOP. OPEN IN ADOBE (ACROBAT) READER. COMPLETE AND 'SAVE'. CLICK 'SUBMIT'. THIS WILL OPEN YOUR EMAIL PROGRAMME. CLICK 'SEND' TO EMAIL TO [office@igap.co.uk](mailto:office@igap.co.uk)**

Adobe/Acrobat Reader can be downloaded FREE from [www.adobe.com](http://www.adobe.com). For our convenience please save your finished form with your initials in the title e.g. 'IGAP Application form 2011-12 JBL' before clicking 'Submit'.

Name (including title)	Age
Address	Telephone (home)
	(work)
	Fax
email	Mobile
Current occupation	

**Life experience and educational background – please see overleaf**

Have you participated in the Studies Programme before? Yes  No

Are you currently, or have you been, in psychotherapy? Yes  No  If yes:

Please give name and address of psychotherapist(s)

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Dates of therapy

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Orientation of therapy

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Are you currently, or have you been, a member of a psychotherapeutic training programme? Yes  No

If yes, please give details of programme(s)

Dates of course(s)

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Orientation of course(s)

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Please indicate the numbers of the courses you wish to attend

First Term	Courses numbered
Second Term*	Courses numbered
Third Term*	Courses numbered

**\* Second and third term choices should be emailed to the office before the deadline given in the programme. If you cannot attend any courses for which you have applied, please let the office know at the earliest opportunity.**

**PTO**



## **LIFE EXPERIENCE AND EDUCATIONAL BACKGROUND**

**Write a short statement about yourself, including, for example, past occupation(s), education, how you came to be interested in Jung, which of Jung's works have particularly impressed you and other relevant experiences and interests.**

## **THE FOLLOWING CONSIDERATIONS MUST BE READ IN FULL BEFORE SIGNING**

- 1 These courses do not constitute a professional training programme or qualification for therapeutic practice.**
- 2 Applications must be received by the deadline given for the term in the programme.**
- 3 Payment is not to be enclosed with your application. You will be notified of fees outstanding upon acceptance for courses before the beginning of term.**

## **REMEMBER TO FILL IN THE ENTIRE FORM**

**ONCE COMPLETE, 'SAVE' AND THEN CLICK 'SUBMIT' BELOW. THIS WILL OPEN YOUR EMAIL PROGRAMME.**

**CLICK 'SEND' TO EMAIL TO [office@igap.co.uk](mailto:office@igap.co.uk)**

You can also print and post to IGAP, PO Box 22343, London W13 8GP. If you have any difficulties call IGAP on 020 8933 0353.

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Where did you hear about IGAP?

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Date