

## CTP 2017-18 TT – Class Registration Form

Due May 18th - Noon

### CONTACT INFORMATION

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ m/d/y

#### Name

First: \_\_\_\_\_ Last: \_\_\_\_\_

#### Address

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ - \_\_\_\_\_

E-Mail: \_\_\_\_\_ @ \_\_\_\_\_

#### Phone Number

Home: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Cell: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Work: ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

### **RELEASE OF CONTACT INFORMATION**

In the event a Lecture or Class is cancelled due to unforeseen circumstances I authorize the release of the following contact information to the Centre reception:  Y  N

Phone No.  H / C / W E-Mail

**Please note that while undertaking the training program at CTP, no student is to enter any other psychotherapy training without the permission of the faculty.**

## Psychotherapy Training Group

**\$ 4,385.00**

Prerequisite – Admission to CTP

### PSYCHOTHERAPY TRAINING GROUP SELECTION

Please indicate if you will be taking Group. Returning students will be placed in their previous groups. If you require a change of Group please contact your current Group leaders.

**Psychotherapy Training Group**

The psychotherapy training group includes minithons, and marathons. It does not include individual therapy.

## Concentrations

**\$ 1,125.00**

Choose two and list them in the order of your preference. Please note that we try to accommodate your choice(s) however availability is determined by enrolment numbers.

1	2	<input type="checkbox"/> Those wishing to enroll in two (2) Concentrations please indicate two 1 <sup>st</sup> choices and two (2) second choices			
<input type="checkbox"/>	<input type="checkbox"/>	<b>Working with Trauma</b>	Jackie Herner Gord MacLeod	Sundays 1:00 to 4:15 The Centre Monthly	CP-002-WWT
<input type="checkbox"/>	<input type="checkbox"/>	<b>D.W. Winnicott</b>	Peter Dales	Saturdays 10:00 to 1:30 123 Admiral Monthly Start Sept 16/17	CP-002-WINN
<input type="checkbox"/>	<input type="checkbox"/>	<b>Transference &amp; Counter Transference</b>	Peter Dales, Judy Dales	Saturday 10:00 to 1:15 123 Admiral Rd Monthly Start Sept 23/17	CP-002-TCT
<input type="checkbox"/>	<input type="checkbox"/>	<b>C.J. Jung and Using Intuition in Psychotherapy</b>	Adam Crabtree	Monthly	CP-002-CJJ
<input type="checkbox"/>	<input type="checkbox"/>	<b>Fairbairn &amp; Guntrip</b>	Sharon Bedard	Saturdays 10:30 – 200 Bertmount Ave Monthly	CP-002-FG

**Note: Available descriptions may be found at: CTP.net**

## Elective Seminars

**\$ 1,125.00**

**Prerequisite – Clinical Phase, Clinical Applications 1 & 2 Completed**

Choose two and list them in the order of your preference. Please note that we try to accommodate your choice(s) however availability is determined by enrolment numbers.					
1	2	<input type="checkbox"/> Those wishing to enroll in two (2) Seminars please indicate two 1 <sup>st</sup> choices & two (2) second choices			
<input type="checkbox"/>	<input type="checkbox"/>	Authentic Movement	Anna Binswanger-Healy / Janie Kim	Mondays 3:30 to 5:30 The Centre Weekly beginning January	TIS-003-AM
<input type="checkbox"/>	<input type="checkbox"/>	Christopher Bollas – As the Evocative Object	Sharon Bedard	Saturdays 10:30 to 2:00 Bertmount Ave Monthly	TIS-003-CB
<input type="checkbox"/>	<input type="checkbox"/>	The Erotics of Sexuality	Sharon Bedard	Saturdays 10:30 to 2:00 Bertmount Ave Monthly	TIS-003-ES
<input type="checkbox"/>	<input type="checkbox"/>	Diversity Amongst Clients & Clinicians	Sharon Bedard	Saturdays 10:30 to 2:00 Bertmount Ave Monthly	TIS-003-DAC

## Required Seminars

**\$ 1,125.00**

Please note: Dream Seminar and Critical Reflections must be completed in order to graduate.

<input type="checkbox"/>	<b>Dreams</b>  Prerequisite – 3 Years of Psychotherapy Training Group, TT or Graduate	Adam Crabtree	TBA Weekly (for 1) Semester	TIS-003-DR
<input type="checkbox"/>	<b>Critical Reflections</b>  Prerequisite – 3 Years of Psychotherapy Training Group, TT 2 <sup>nd</sup> year of seeing clients, or Graduate	Eric Evans	Monday 7:00 to 9:00 The Centre Start date Sept/11/2016 Weekly (for 1) Semester	TIS-003-CRLP

**Note: Available descriptions may be found at CTP.net**

## Clinical Seminars

### Semester 3

**\$ 1,125.00**

**Prerequisite – Clinical Phase of CTP Program – Clinical Applications 1 & 2 Completed**

Note: A student cannot take Clinical Applications 3 in the same year that they take Clinical Applications 1 & 2

<input type="checkbox"/>	<b>Clinical Applications – Semester 3</b>	Susan Wood	Friday 6:30 to 8:30 The Centre 316 Dupont Weekly (for 1) Semester Begins Sept	CP-003-CA3
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Note: Available descriptions may be found at: CTP.net

### Supervision Seminar

**\$ 2,275.00**

**Prerequisite – TT in second year of working with clients**

Supervision Seminar

Choose two and list them in the order of your preference. Please note that we try to accommodate your choice(s) however availability is determined by enrolment numbers.					
1	2				
<input type="checkbox"/>	<input type="checkbox"/>	<b>Supervision Seminar</b>	Sharon Bedard	Tuesday Start Btwn 5:00 & 7:00 Bertmount Ave Weeklytime to be discussed & determined by participants	TIS-003-SG
<input type="checkbox"/>	<input type="checkbox"/>	<b>Supervision Seminar</b>	Peter Dales	Wednesday 7:00 to 9:00 123 Admiral Rd Weekly Start Sept 20/17	TIS-003-SG
<input type="checkbox"/>	<input type="checkbox"/>	<b>Supervision Seminar</b>	Cathleen Hoskins	Tuesday 5:15 – 7:30 The Centre Rm A Weekly Start Sept 12	TIS-003-SG

## Special Seminars

**\$ 0.00**

Prerequisite – Clinical Phase of CTP Program

<p><b>Please note that availability is determined by enrolment numbers.          These one day Seminars are offered at no charge to current students.</b></p>				
<input type="checkbox"/>	Trauma	Susan Wood/Jackie Herner	Saturday Feb 24 9:30 – 4:30 The Centre – 316 Dupont St	SP-001-CA12
<input type="checkbox"/>	TBA	TBA	TBA	SP-002-CA12

## LETTER OF UNDERSTANDING FOR ALL CTP THERAPISTS-IN-TRAINING

As a therapist-in-training at the Centre for Training in Psychotherapy, I understand that all clients I see for therapy must be:

- 1) interviewed by a CTP faculty member
- 2) supervised by a faculty member and
- 3) registered by me as my client, using the appropriate form.

I understand that an important function of the primary supervisor is to help me decide when and at what rate to take on clients, so as to further my optimal development as a therapist-in-training.

I understand that by agreeing to work with a client I make a commitment to continue that work beyond my graduation from CTP. Discontinuation of my therapy services must be in accordance with practice standards of the College of Registered Psychotherapists of Ontario.

Name: \_\_\_\_\_

Please print

Signature: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ d/m/y

Program		Course Fee	Deposit Due August 1st
<input type="checkbox"/>	Psychotherapy Training Group	\$ 4,385.00	\$ _____
<input type="checkbox"/>	Clinical Applications Semester 3	\$ 1,125.00	\$ _____
<input type="checkbox"/>	Concentration	\$ 1,125.00	\$ _____
<input type="checkbox"/>	Concentration	\$ 1,125.00	\$ _____
<input type="checkbox"/>	Elective Seminar	\$ 1,125.00	\$ _____
<input type="checkbox"/>	Elective Seminar	\$ 1,125.00	\$ _____
<input type="checkbox"/>	Required Seminar – Critical Reflections	\$ 1,125.00	\$ _____
<input type="checkbox"/>	Required Seminar - Dreams	\$ 1,125.00	\$ _____
<input type="checkbox"/>	Supervision Seminar	\$ 2,275.00	\$ _____
<input type="checkbox"/>	Monthly Payment Plan Administration Charge (if applicable)	<b>\$ 25.00</b>	\$ _____
<input type="checkbox"/>	PEPweb	\$ 150.00	\$ 150.00
<b>Total</b>			\$ _____
10% Deposit Due August 1st			\$ - _____
Balance Due September 15 <sup>th</sup> (Course Total minus deposit paid)			\$ _____

**Payment Options**

<input type="checkbox"/>	Full payment
<input type="checkbox"/>	Monthly payment plan

### Tuition Checklist

- (1) cheque for 10% Deposit dated August 1<sup>st</sup>
- (1) cheque for Balance due dated September 15<sup>th</sup>

Or

- (1) cheque for 10% Deposit dated August 1<sup>st</sup>
- (4) cheques for Balance due made up of equal payments dated:  
Sept. 15, 2017 - Oct. 15, 2017 - Nov. 15, 2017 - Dec. 15, 2017

*If you have any questions please forward them to Phil LaRose, Assistant Registrar.  
([philctp@rogers.com](mailto:philctp@rogers.com))*

**Note: Students requiring an alternate payment plan must make their request by email to Phil LaRose, Assistant Registrar before May 18<sup>th</sup>. Contact - [philctp@rogers.com](mailto:philctp@rogers.com)**

**Registration packages are due no later than 3pm on Friday, May 18th. If you are submitting your package after the May 18th deadline please inform Phil LaRose, Assistant Registrar. ([philctp@rogers.com](mailto:philctp@rogers.com)) A Late Registration Fee of \$75.00 made by cheque payable to CTP must accompany your submission.**

- |                                                                                                                                                                                                                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> <b>Yes I have reviewed the attached administration fee schedule, tuition and refund policy and acknowledge that the Pep Web fee, Administration fees and Course deposit fees are <u>Non-refundable</u>.</b> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Please print

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ m/d/y



### Information Update – returning students only

Please indicate changes/additions since last year's Registration

<input type="checkbox"/>	Group	Name of Group Leaders: _____	2015/2016
<input type="checkbox"/>	Seminars	1: _____ 2: _____ 3: _____	
<input type="checkbox"/>	Supervision Seminar	Name of Seminar Leader: _____	
<input type="checkbox"/>	Concentrations	1: _____ 2: _____ 3: _____	
<input type="checkbox"/>	Faculty Advisor Meetings	Name of Faculty Advisor: _____	Number of Meetings: _____
<input type="checkbox"/>	Personal Therapy	Name of Psychotherapist: _____ Type of Psychotherapy - Psychodynamic <input type="checkbox"/> Other – Please indicate _____	Number of Sessions: _____

## TUITION AND REFUND POLICIES

### A. Tuition Policy

As a not-for-profit educational institution CTP operates solely on the basis of student tuition revenue; there is no government subsidy or other source of income to fund the program. The tuition fee is determined by the actual operating costs (faculty payments, property rent, tax, utilities, maintenance, administration, marathion rent, etc).

Faculty members are not compensated with a salary & benefit package. Since CTP began in 1985 faculty have continued to accept a stipend, which has increased on an inflationary basis. Faculty continue to carry their administrative roles with little remuneration.

CTP does not build in an annual profit margin. For this reason, the tuition and administrative fees are increased as necessary to cover the actual cost of delivering the program, which includes the inflationary increase and for any unanticipated expense that has been incurred or is to be forecasted for the upcoming academic year.

The 2016-17 fees have been established as follows: <b><u>All costs shown are per academic year</u></b>			
Pep web	\$150	Returned Bank Payment	\$35
Late Registration	\$75	4 Month Payment Plan	\$25
Each request to change post-dated payment plan	\$25	Clinical Phase application	\$140
Supervision application	\$200	Request to graduate	\$200
Individual Supervision - Per session	\$80	Letter Request &/or Duplicate tax receipt	\$25
Late Phase Application	\$45	Transcript	\$80

An annual fee of \$150 must accompany the completed registration form **for all students**, including students who are not taking courses, but who wish to maintain a basic registration in the program. This is the fee for your student subscription to PEP web. It is a condition of CTP's contract with PEP and is a mandatory requirement.

The administration fees that CTP incurs in order to administer banking and student financial accounts will not change this year Students can minimize these costs by ensuring their financial account is paid according to their payment plan agreement.

**B. Refund Policy**

One of our tuition charging problems is the human tendency to change one's mind. This is understandable, but financially challenging in a school that tries to keep learning groups to effectively small numbers. If we use registration numbers to set up small groups, which are also financially viable and if a number of students change their minds in September, we are often left with four or five groupings that do not meet their costs. As some of you may know, in the past we have not cancelled such groups out of respect for the students who remain registered. We want to continue this policy of maintaining groupings wherever we can, so our refund policy is designed to make this financially possible.

**For lectures and psychotherapy training groups: There are no refunds after December 15th.**

Prior to December 15th, a 15% operating cost is retained plus a pro rata charge for learning meetings up to the date of withdrawal, which is subject to faculty and Registrar approval.

**For seminars, concentrations, clinical applications and supervision seminars both September and January terms:**

A request for cancellation received by the Registrar within:

30 days of the Registration deadline will be eligible for 60% refund of tuition fees

31 to 60 days of the Registration deadline will be eligible for 30% refund of tuition fees.

There is **NO REFUND after 60 days** from the Registration deadline **and no rain check or deferral credit.**

Any notice of changes in registration and/or requests for refunds are to be made in writing to the Registrar. The date when such a request is received will be the date used to calculate the refund (if applicable).