

## **CTP 2018-19 Clinical Phase – Course Registration Form**

**Due May 15<sup>th</sup> – 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.**

**New students only – Groups meet on Tuesday, Wednesday and Thursday evenings, if you cannot attend on one of those evenings please indicate – attempts will be made to accommodate your requirements, however availability is determined by Group enrolment.**

<input type="checkbox"/>	<b>Psychotherapy Training Group</b>
<input type="checkbox"/>	<b>I cannot attend Tuesday / Wednesday / Thursday (Please circle)</b>

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

## **Clinical Applications Seminars**

### **Semester 1 & 2**

**\$ 2,275.00**

Prerequisite – Clinical Phase of CTP Program

1	2				
<input type="checkbox"/>	<input type="checkbox"/>	<b>Clinical Applications – Semester 1 &amp; 2</b>	Susan Wood	Monday 6:30 – 8:30 The Centre – 316 Dupont St Weekly	CP-003-CA12

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

## Concentrations

**\$ 1,125.00**

Concentrations may be taken in the 3<sup>rd</sup> year if the student has completed the Foundation Phase of the program but has not applied for acceptance into the Clinical Phase of the CTP program.

**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>Carl Jung</b>	Adam Crabtree
<input type="checkbox"/>	<input type="checkbox"/>	<b>Intersubjectivity</b>	Sharon Bedard	Saturdays 10:30 to 2:00 Bertmount Ave Monthly	CP-002-IS
<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	CP-002-TCT
<input type="checkbox"/>	<input type="checkbox"/>				

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

**COURSES ON THIS PAGE REQUIRE THE PRIOR SATISFACTORY  
COMPLETION OF CLINICAL APPLICATIONS SEMESTERS 1 & 2**

**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 St, Weekly (for 1) Semester Begins Sept	CP-003-CA3
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**Elective Seminars \$ 1,125.00**

**Prerequisite – Clinical Phase of CTP Program – 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.**

<b>1</b>	<b>2</b>	<input type="checkbox"/> <b>Those wishing to enroll in two (2) Seminars please indicate two 1<sup>st</sup> choices and two (2) second choices</b>		
<input type="checkbox"/>	<input type="checkbox"/>	Death Mourning & Loss	Sharon Bedard	Saturdays 10:30 to 2:00 Bertmount Ave Monthly TT-003-DML
<input type="checkbox"/>	<input type="checkbox"/>	Aggression & its Place in Being Human	Sharon Bedard	Saturdays 10:30 to 2:00 Bertmount Ave Monthly TT-003-APBH
<input type="checkbox"/>	<input type="checkbox"/>	Authentic Movement	Janie Kim	Sundays 2:00 to 4:00 The Centre Weekly Jan 2019 TT-003-AM

## Special Seminars

**\$ 0.00**

**Prerequisite – Clinical Phase of CTP Program**

<b>Choose and list them in the order of your preference. Please note that we try to accommodate your choice however availability is determined by enrolment numbers.</b>				
<b>1</b>	<b>These one day Seminars are offered at no charge to current students.</b>			
<input type="checkbox"/>	<b>PDM</b>	Judy Dales	Saturday xx 9:30 – 4:30 The Centre – 316 Dupont St	SP-003-PDM
<input type="checkbox"/>	<b>Risk Assessment</b>	TBA	Saturday xx 9:30 – 4:30 The Centre – 316 Dupont St	SP-003-RA

## **Letter of Understanding for all Students Admitted to the CTP Psychotherapy Training Group**

As a student admitted to the Psychotherapy Training Group at the Centre for Training in Psychotherapy

I have read and understood the Objectives and Requirements of the Psychotherapy Training Group in the CTP Psychotherapy Training Group Syllabus.

I have read and understood the Outcomes and Assessment rubrics in the Psychotherapy Training Group Syllabus which the group leaders use to assess progress.

I understand that progression also depends upon the carefully considered judgement of the CTP Faculty that a student should advance.

I understand that the Psychotherapy Training Group can catalyse powerful emotional states which can only be comprehended gradually. I may leave a group session in this state and sometimes remain in this state between sessions.

I understand that if I have questions or concerns about my Training Group experience I can speak with my Group Leaders, Faculty Advisor, any CTP Faculty member or my Individual Therapist for guidance.

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

Please print

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

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

Program		Course Fee	
<input type="checkbox"/>	Psychotherapy Training Group	\$ 4,385.00	\$ _____
<input type="checkbox"/>	Clinical Applications Semester 1 & 2	\$ 2,275.00	\$ _____
<input type="checkbox"/>	Clinical Applications Semester 3 <b>Prerequisite - Clinical Apps 1 &amp; 2 Completed</b>	\$ 1,125.00	\$ _____
<input type="checkbox"/>	Elective Seminar <b>Prerequisite - Clinical Apps 1 &amp; 2 Completed</b>	\$ 1,125.00	\$ _____
<input type="checkbox"/>	Elective Seminar <b>Prerequisite – Clinical Apps 1 &amp; 2 Completed</b>	\$ 1,125.00	\$ _____
<input type="checkbox"/>	Concentration	\$ 1,125.00	\$ _____
<input type="checkbox"/>	Concentration	\$ 1,125.00	\$ _____
<input type="checkbox"/>	PEPweb Mandatory	\$ 155	\$ 155
<b>Total</b>			\$ _____
10% Deposit Due August 1st			\$ - _____
Balance Due Beginning September 15 <sup>th</sup> (Course Total minus deposit paid)			\$ _____

**Tuition Checklist**

(1) cheque for 10% Deposit dated August 1<sup>st</sup>

**NEW!**

**(8) cheques for Balance due made up of equal payments dated:**  
 Sept. 15, 2018 - Oct. 15, 2018 - Nov. 15, 2018 - Dec. 15, 2018  
 Jan. 15, 2019 - Feb. 15, 2019 - Mar. 15, 2019 - Apr. 15, 2019

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

**Registration packages are due no later than 3pm on Friday, May 15th. 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.**

**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 Non-refundable.**

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: _____	2017/2018
<input type="checkbox"/>	Seminars	1: _____ 2: _____ 3: _____	
<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 2018-19 fees have been established as follows: <u>All costs shown are per academic year</u>			
Pep web	\$155	Returned Bank Payment	\$35
Late Course Registration	\$75		
Each request to change post-dated payment plan	\$35	Clinical Phase application	\$150
Therapist in Training application	\$200	Request to graduate	\$200
Individual Supervision - Per session	\$80	Letter Request &/or Duplicate tax receipt	\$35
Late Phase Application	\$75	Transcript	\$80

An annual fee of \$155 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 PEPweb. 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).