**C.G. Jung Institute of Los Angeles**

**Doctoral Candidate Application**

**Personal Information**

Name Click or tap here to enter text. Address Click or tap here to enter text.

Home Phone Click or tap here to enter text. Work Phone Click or tap here to enter text.

Mobile Phone Click or tap here to enter text.

School Email Click or tap here to enter text. Personal Email Click or tap here to enter text.

**Academic Training**

Doctoral Program Click or tap here to enter text. Expected Degree Completion Click or tap to enter a date.

**Doctoral Requirements**

**Coursework**

Expected Degree Completion Click or tap to enter a date.

Coursework Remaining Click or tap here to enter text.

**Dissertation**

Student’s Dissertation Process Click or tap here to enter text.

Dissertation Status Click or tap here to enter text.

Expected Dissertation Date Click or tap to enter a date.

Expected Dissertation Completion Click or tap to enter a date.

Expected Degree Completion Click or tap to enter a date.

Dissertation Topic Click or tap here to enter text.

**Comprehensive Examinations**

Exams Complete Yes No

**Doctoral Candidacy**

Advanced to Candidacy Yes No

**Master’s Degree**

Institution Click or tap here to enter text. City Click or tap here to enter text. State Click or tap here to enter text.

Major / Program Click or tap here to enter text. Year Degree Conferred Click or tap to enter a date.

**Undergraduate / College Degree**

Institution Click or tap here to enter text. City Click or tap here to enter text. StateClick or tap here to enter text.

Major / Program Click or tap here to enter text. Year Degree Conferred Click or tap to enter a date.

**Clinical Training**

**Summary of Clinical Experience (Enter one number for each category below. For example: 10, 11, 15)**

**Terminal Doctoral Doctoral**

**Masters to 11/01 to 03/1**

Number of intake interviews conducted Click or tap here to enter text.

Number of adult clients seen in short-term therapy Click or tap here to enter text.

Number of adult clients seen in long-term therapy Click or tap here to enter text.

Number of child/adolescent clients seen in short-term therapy Click or tap here to enter text.

Number of child/adolescent clients seen in long-term therapy Click or tap here to enter text.

Number of families seen in family therapy Click or tap here to enter text.

Number of couples seen in couples therapy Click or tap here to enter text.

Number of distinct psychotherapy groups facilitated Click or tap here to enter text.

Number of testing batteries administered scored & interpreted Click or tap here to enter text.

Number of assessment reports written Click or tap here to enter text.

Total Hours of Individual or Group Supervision Click or tap here to enter text.

Total House of Direct Intervention experience Click or tap here to enter text.

Total Hours of Assessment Experience Click or tap here to enter text.

Other experiences of note: Click or tap here to enter text.

**Language Competency**

Spoken Languages, Other than English Click or tap here to enter text.

Written Languages, Other than English Click or tap here to enter text.

**Licenses**

Current and valid Licenses, Certificates, or Registrations

Click or tap here to enter text.

**Professional Conduct**

Have you ever been suspended, terminated, asked to resign, or put on probation by a practicum or internship training site, employer or graduate academic program?

Yes  No

If yes, please explain:

Click or tap here to enter text.

Have you ever reneged on a training contract from an internship?

Yes  No

If yes, please explain:

Click or tap here to enter text.

**Attestation**

By signing below I attest that all information provided herein is true to the best of my knowledge and that I have not intentionally misrepresented myself or doctoral program in any way. I understand that any intentional falsification, on this application or during any aspect of the internship application process, may lead to a withdrawal of consideration or dismissal from the internship program.

I have read fully the information provided to me regarding the internship program to which I am applying, and agree to start the internship on the date specified in these materials.

Signature: Click or tap here to enter text. Date: Click or tap to enter a date.