

**INTERNATIONAL ASSOCIATION FOR ANALYTICAL PSYCHOLOGY**

INTERNATIONALE GESELLSCHAFT FÜR ANALYTISCHE PSYCHOLOGIE

ASSOCIATION INTERNATIONALE DE PSYCHOLOGIE ANALYTIQUE

ASSOCIAZIONE INTERNAZIONALE DI PSICOLOGIA ANALITICA

ASOCIACIÓN INTERNACIONAL DE PSICOLOGÍA ANALÍTICA

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**Application for a Screening Interview towards Individual Membership in the IAAP**

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

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

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_; fax: \_\_\_\_\_

Email: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Country of citizenship: \_\_\_\_\_;

Permanent residence if different from present address:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Hours of analysis with IAAP members: \_\_\_\_\_

(to be verified with letters from all IAAP analysts stating the total number of hours of analysis and the dates between which these were given).

Hours of supervision with IAAP members: \_\_\_\_\_

(to be verified with letters from all IAAP analysts stating the total number of hours of supervision and the dates between which these were given as well as a completed *Consultation Evaluation Form* filled out by each supervisor).

Along with this application please include:

- Curriculum Vitae that includes information about academic background, professional training, and experience as a psychotherapist
- Professional Autobiography with analytical insights and reflections (approximately 10 pages, double spaced in English)
- A brief statement about eligibility (see requirements for IAAP Individual Membership : go to *Main Menu (top) > Individual Membership > Individual Training through IAAP*)
- A list of any previous applications for analytic training, including the name of the Group Members, the dates of the applications, and the outcomes.

Upon receipt of all documents, applicants will be notified whether or not they will be accepted for a screening interview. If accepted for an interview, this will be arranged by the Individual Membership subcommittee of the IAAP; a fee is assessed for this interview, details to be provided upon scheduling.

Before signing this application please read the IAAP Code of Ethics for Individual Members. The document can be found in this section (*Main Menu (top) > IAAP Overview > Individual Membership*).

\_\_\_ I have read the IAAP Code of Ethics for Individual Members and if I am accepted as a member I agree to abide by this code throughout the time I am in route.

\_\_\_ I agree to be under the jurisdiction of the IAAP's Ethics Committee as long as I am pursuing Individual Membership in the IAAP.

\_\_\_ I declare I have no outstanding ethic complaints or findings against me.

\_\_\_ I hereby agree to abide by and follow the IAAP policy of non discrimination on the basis of race, religion, ethnic origin, gender and sexual orientation.

Applicant's signature: \_\_\_\_\_

Date: \_\_\_\_\_