## PSYCHOTHERAPY FOR PSYCHOSIS COURSE ENROLLMENT FORM



(rev. 9/12/19)

P: 646-754-4870

**Email: pany@nyulangone.org** 

PERSONAL INFORMATION							
Name:		Degree:					
Date of Applicat	ion:						
HOME	Address: City/State/Zip	D:					
	Telephone:			Fax:			
	Email:			Cell:			
PRIVATE OFFICE	Address: City/State/Zip	D:					
	Telephone:			Fax:			
	Email:						
INSTITUTIONAL EMPLOYMENT	Address: City/State/Zip	D:					
	Telephone:		Fax:				
	Email:		·				
Gender:		Date of Birth:			Citizenship:		

## Nondiscrimination Policy

PANY admits training candidates of any race, color, national and ethnic origin, actual or perceived sexual orientation, gender identity and gender expression to all the rights, privileges, programs, and activities generally accorded or made available to candidates at the Institute. PANY does not discriminate on the basis of race, color, national and ethnic origin, actual or perceived sexual orientation, gender identity or gender expression in administration of its educational policies, admissions policies, and other institute-administered programs.

## **CURRICIULUM VITAE**

Please attach your Curriculum Vitae to this application. Besure to include:

- Current and recent professional activities
- Training (undergraduate, graduate, internships, externships, residencies, fellowships, and other postdoctoral training)
- Professional experience

REFERENCE – Please provide a clinical supervisor, professor, or colleague who can speak briefly to us about you.								
Name:			Degree:					
Address:			- 3					
City/State/Zip:								
Telephone:		Fax:						
Email:								
How did you first hear of PANY?								
Have you been to any of our events? If so, please list.								
Please tell us about your interest in participating in the Psychotherapy for Psychosis Course								
I understand that the electronic submission by email is equivalent to mysignature.								
Signature: Date:								

## How to enroll and submit payment:

- Email your form and curriculum vitae to pany@nyulangone.org or fax to 646-754-9540.
- Submit \$400 course or \$850 course/group payment by going to <u>www.pany.org/course-application</u> and using Paypal links for Paypal or credit card payment.
- For Zelle payments, send to pany@nyulangone.org
- Payments by mail:
  - Make payable to "Psychoanalytic Association of New York" and mail to:

Psychoanalytic Association of New York NYU Department of Psychiatry One Park Avenue, 8th Floor New York, NY 10016 ATTN: PSYCHOANALYTIC

❖ If you do not receive a phone call or email that we received your application within 2 weeks of submission, please contact PANY at 646-754-4870.

Thank you!