



**The New Jersey Institute for Training in Psychoanalysis**

121 Cedar Lane – 3A, Teaneck, NJ 07666

201-836-1065

info@njinstitute.com

**Application for Admission**

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

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (H); \_\_\_\_\_ Phone (C): \_\_\_\_\_

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

Advanced Degree/License: \_\_\_\_\_

\_\_\_\_\_

Prior Psychoanalytic Training: \_\_\_\_\_

Program to which you are seeking admission (please select one):

Introduction to Psychoanalysis: \_\_\_\_\_

Advanced Psychoanalytic Program: \_\_\_\_\_

Psychotherapy of Children and Adolescents: \_\_\_\_\_

A \$50.00 application fee must accompany this application. Please mail your application to:

The New Jersey Institute for Training in Psychoanalysis

121 Cedar Lane, Suite - 3A, Teaneck, NJ 07666

Upon the receipt of your application, you will be contacted for an interview by a member of the admissions committee