

## **Application for Enrollment in the Four Year Training Program in Integral Healing**

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

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

\_\_\_\_\_

\_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Business Phone:** \_\_\_\_\_

**Occupation:** \_\_\_\_\_

**We would also like to know who you are. Please include with your application a resume, and an autobiographical essay in which you provide us with information covering the following points:**

- 1. Your motivation for applying to this program.**
- 2. Your strengths and limitations, personally and professionally.**
- 3. The spiritual and therapeutic growth work you have done in the past, including body work.**
- 4. Significant tasks and life experiences.**
- 5. Your life's work.**
- 6. Your personal and professional goals.**
- 7. Your preparedness to make a four year commitment to this program.**
- 8. How you expect participation in the Integral Healing Training Program to affect your personal and professional life.**
- 9. Whether you intend to complete all of the requirements for certification and are therefore eligible for acceptance as a clinical member of the Ontario Society of Psychotherapists.**
- 10. The names, addresses, and phone numbers of two people you will ask to evaluate and recommend you to this program. The evaluation should include their knowledge of your motivation, relevant experiences and your potential as a therapist. Have them specify their relationship to you and send their evaluations directly to the Director of Admissions:**

**John Went  
Integral Healing Centre of Toronto  
1352 Bathurst St. Suite 102  
Toronto, ON  
M5R 3H7**