



Institute of Counseling  
*and* Psychoanalytic Studies  
——— New Jersey's BGSP Campus

**FALL 2021**

August 30 - December 23



**Registration Packet**

**All ICPS Programs**

301 South Livingston Avenue, Livingston, New Jersey 07039

Website: [www.nj.bgsp.edu](http://www.nj.bgsp.edu) Phone: 973-629-1001 Email: [acapnj@acapnj.org](mailto:acapnj@acapnj.org)



Institute of Counseling  
and Psychoanalytic Studies  
— New Jersey's BGSP Campus

Dear ICPS Student,

Welcome to a new semester! It's time to contact your advisor to schedule an appointment to meet and discuss course selection.

After completing your forms please refer to the checklist on the last page of this packet to avoid a delay in your registration.

As you know, it's very important that students register by the April 1st deadline in order to insure your class preferences. In addition, this allows the school to appropriately plan for the semester. Students who register and submit forms after the deadline will pay a late fee of \$150.

The Registration Office is available for all your registration needs and can assist with any questions regarding registering for classes, adding or dropping classes and determining tuition and fee charges. Feel free to contact me anytime.

Regards,

Loretta M. Calabrese  
Registrar/Office Manager  
301 So. Livingston Ave, Livingston, NJ 07039  
Phone | 973-629-1001  
Email | [acapnj@acapnj.org](mailto:acapnj@acapnj.org)



Institute of Counseling  
and Psychoanalytic Studies  
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# REGISTRATION FORM

## Fall 2021

### August 30-December 23

- Master of Arts in Clinical Mental Health Counseling
- Master of Arts in Psychoanalysis
- Certificate in Mental Health Counseling
- Non-Matriculated

#### Schedule of Fees 2021-2022

##### Program Tuition Fees

Tuition for all courses per credit \$830  
All Directed Research per credit \$830  
Group Supervision per credit \$830

##### Administrative Fees

Registration per semester \$150  
Curriculum support per semester \$360  
Technical support per semester \$100  
Extended payment plan \$100 (\$15 late payment fee)  
Late payment \$150  
Returned check \$25  
Official transcript \$20  
Leave of absence \$250 (includes technical support fee)  
Leave of absence w/access to library resources additional \$360  
Graduation \$250

*Please make checks payable to:*

**Boston Graduate School of Psychoanalysis**

*Please mail registrations and payments to:*

**Administrative Office ICPS / ACAP**  
301 So. Livingston Ave, Livingston, NJ 07039

**Full Name** \_\_\_\_\_

**Street Address** \_\_\_\_\_ **City** \_\_\_\_\_

**State** \_\_\_\_\_ **Zip code** \_\_\_\_\_ **Country if not U.S.** \_\_\_\_\_

**Cell Phone** \_\_\_\_\_ **Phone #2** \_\_\_\_\_

**Email** \_\_\_\_\_

**Emergency Contact Name/Phone** \_\_\_\_\_

<b>List Course# / Description / Instructor</b>	<b>FEE</b>
1.	
2.	
3.	
4.	
<b>If you are registering for an SGS list SGS COURSE# / INSTRUCTOR / DAY &amp; TIME &amp; MUST LIST SECOND CHOICE</b>	
<b>SGS Choice #1</b>	
<b>SGS Choice #2</b>	
	<b>Registration Fee (required all registrations) \$150.00</b>
	<b>Curriculum &amp; Technical Support Support Fees (required all registrations) \$460.00</b>
	<b>Late fee after 8/1/21 \$150.00</b>
	<b>TOTAL TUITION</b>

#### Refund Schedule

Approved drop in writing before 1<sup>st</sup> class  
Approved drop in writing before 2<sup>nd</sup> class  
Approved drop in writing before 3<sup>rd</sup> class  
Approved drop in writing before 4<sup>th</sup> class  
Drop on or after 5<sup>th</sup> class no refunds

Administrative fees are non-refundable

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Advisor Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*Registration will not be accepted without an advisor signature*

# Course Schedule Fall 2021

August 30 – December 23

## MONDAY

4:50-7:00pm GPSA 511 The Counseling Profession/Hughes  
7:10-9:30pm GPSA586 Career Counseling/Chang

## TUESDAY

12:00-1:00pm GPSA703B SGS/Lazar - *changed to Thu 2:15-3:15pm*  
12:00-2:20pm GPSA703-1 Fieldwork Seminar/Semel (limited to 12 students)  
3:15-4:15pm GPSA703L SGS / Ladden  
5:30-7:00pm GPSA703C SGS/Ashworth  
4:50-7:00pm GPSA824 Treatment Techniques: Symbolic and Emotional Communication/Hess  
7:00-8:30pm GPSA703D SGS-Fieldwork/Thomas  
7:10 - 9:30 pm GPSA703-2 Fieldwork Seminar /Ashworth (limited to 12 students)

## WEDNESDAY

2:30-4:00pm GPSA703E SGS/Silver  
4:50-7:00pm GPSA828 The Psychodynamics of the Family Life Cycle/Vaccaro  
5:20-6:50pm GPSA703F SGS/Lapides  
7:10-9:30pm GPSA184/541 Psychopathology: Primitive Mental States/Gerber

## THURSDAY

9:30-11:50am GPSA758B Continuing Case/Rosenthal  
9:30-11:50am GPSA532 Group Dynamics II/Rosenthal  
9:30-11:00am GPSA703G SGS/Bratt  
12:00-1:30pm GPSA703H SGS/Vaccaro  
3:10-4:40pm GPSA703J SGS/Semel  
3:15-4:45pm GPSA703K SGS/DeLia  
3:15-4:45pm GPSA703L SGS/Miller  
4:50-7:00pm GPSA507 Human Development: Lifespan/Silver  
4:50-7:00pm GPSA753 Clinical Case/DeLia  
7:10-9:30pm GPSA521 Psychoanalytic Counseling: Basic Concepts/Bratt

GPSA 760/761 Clinical Research Tutorial – Day/time arranged with instructor

GPSA559-562 Directed Research -Day/time arranged with instructor

GPSA 555B Research Seminar – Proposal Writing/Gerber/TBA

**First day of class** Monday August 30

**Registration late date** August 1<sup>st</sup>

No Class Meetings

November 23-November 25 Thanksgiving

9/15 Yom Kippur (discretion of instructor)

## **ICPS COURSE DESCRIPTIONS Fall 2021**

### **GPSA 184 Psychopathology: Primitive Mental States - 3 credits**

This course examines psychopathology of severely regressed states from the perspective of the DSM, psychoanalytic theory and case studies. This comparative approach to diagnosis includes a consideration of symptoms and behaviors listed in the DSM with psychiatric understanding of etiology and function contrasted with and augmented by a psychodynamic understanding. The two different approaches to the diagnostic process will be explored in the course, including the diagnostic and statistical system (DSM), use of the mental status exam, use of clinical interviewing and induced countertransference feelings. The class also discusses implications for treatment. Students will have the opportunity to begin clinical studies by observing their emotional reaction to the class material and visiting two settings.

### **GPSA 507 Human Development: Thru the Lifespan from Birth to Death - 3 credits**

This course focuses on the vicissitudes of human development through the life span and within intrapsychic, biological, family, environmental and cultural context. How the individual approaches developmental tasks or copes with challenges of inner and outer reality, from conception through old age, is reflected in his/her sense of self and is manifested in behavior and life choices. The maturational tasks of adapting and coping that enable growth over the lifespan are examined.

### **GPSA511 The Psychoanalytic Counseling Profession - 3 credits**

This course provides a broad understanding of the psychoanalytic counseling profession as defined by the history, professional standards, scope of practice and application of ethics to theory and practice. The professions of counseling and psychoanalysis are defined and compared through their historical roots with exploration of overlapping practice methods. The importance of personal and professional self-care is emphasized. Students learn ethical decision-making models to assist in making practice decisions.

### **GPSA 521 Psychoanalytic Counseling: Basic Concepts - 3 credits**

This course will introduce the student to basic concepts of psychoanalytic counseling. It will be an introduction to Freudian and modern interventions within counseling and psychoanalytic frameworks. The student will learn about the basic concepts and their applications.

### **GPSA 532 Group Dynamics II: Group Leadership - 3 credits**

This course provides an opportunity to study specific issues relating to therapeutic work with groups in a variety of settings and across different theoretical, clinical frameworks. Through assigned readings, class interaction, and case presentations students will develop an understanding of the unique leadership role involved in effectively leading groups. Ways of studying group dynamics, helping members interact and connect, assessing group progress, as well as designing and implementing therapeutic interventions will be studied. The unique interpersonal dynamics presented in the group situation can be studied from a diverse and comparative theoretical and clinical perspective through this ongoing process of the interactive group class. In addition, the stressors, demands and personal impact on the clinician of working with relationships in groups will be explored. More than 10 clock hours of this course are structured as a group experience activity.

### **GPSA 555B Proposal Writing: Professional Ethics & the Psychoanalytic Case Study Seminar - 3 credits**

In this two-semester course, students will learn how to develop a proposal for the psychoanalytic case paper in the Certificate program. Students will prepare a narrative of the case dynamics which describes the course of treatment and presents a question about some aspect of the case that puzzles the student; show how the therapist listens in order to form an impression of the individual's emotional experience; write a review of the clinical literature that relates to the research area; and describe a method for analyzing a series of process recordings. This course meets the requirements for the Proposal Writing course as a prerequisite for the Tutorial sequence. \*Students must submit a request to the training committee for permission to enroll in this course through their fellow.

### **GPSA 559-562 Directed Research 0.5 - 3.0 credits**

The master's degree student may choose to work with a research chair on the fieldwork paper. The student may enroll in directed research with an advisor and work individually with that faculty member until the project is completed.

### **GPSA 586 Lifestyles and Career Counseling - 3 credits**

This course is designed to provide an understanding of career development and the interrelationship between careers and personality; lifespan development; family; lifestyle choices; use of defense mechanisms and diversity. A broad understanding of career development theories, occupational and educational information sources, assessment tools, and measures, decision-making models and online resources will be reviewed. Students' assignments will be based on self-assessment modules in which the student will apply concepts, tools and theory to the student's own life experience.

### **GPSA 703 Fieldwork Seminar -Issues of Bias in the Treatment of Mental Illness & Small Group Studies (SGS) - 4 credits**

In this course students will study their countertransference responses and listen to and become aware of client's dynamics and how each client speaks to present these dynamics through symbolic communication. This clinical course has a focus on how perceptions shape our views of various society groups. Aspects of bias that influence practice experiences are examined while providing client hours at an externship site. Students will identify the phenomena of bias in cases presented in relation to diversity in terms of ethnicity. Sociological and psychopathological processes. They will learn to observe their own reactions to the clinical work and use with growing understanding as a clinical and technical tool in an ethical way. Students' will achieve this by studying internal unexamined perceptions as well as broader societal prejudices, society trends and subgroups, interactions patterns and the impact of differing lifestyles and maladaptive behaviors, including stress, abuse and discrimination on subjective responses.

### **GPSA 753 Clinical Case Seminar: Practice Technique in Dreams and Symbolic Communication - 3 credits**

This semester we will examine countertransference and ethical issues as they interact in decisions on treatment and technique. Often the conscious and unconscious attitudes of the analyst that shape countertransference also influence one's ethical position. Case examples and readings will help students describe reactions and use them in their treatment decisions. A special focus will be on how analysis of symbolic communication and dreams are influenced by one's countertransference. Students take this advanced course for the duration of their Consultation Center work. It is designed to help students work with patients, to recognize early resistances in treatment, and to understand induction and countertransference resistances in treatment.

### **GPSA758 Continuing Case Seminar: Group Leadership - 3 credits**

Through continuing case presentations of three cases, students will apply theory to practice. With the agreement of the training committee, this course can be selected as fulfilling the requirement for the clinical case course after four semesters of successful completion of clinical case coursework.

### **GPSA760/761 Clinical Research Tutorial - 3 credits**

Students in the Certificate program work individually with a chairperson after development of a proposal approved by the training committee. The chairperson assists the student in completion of the proposal for the project through completion, approval and final presentation of the project.

### **GPSA 824 Treatment Techniques: symbolic Communication and Emotional Communication - 3 credits**

Dreams and the symbolic verbal and nonverbal communications that come in many forms are explored. Often these manifestations help us to understand the latent meaning underlying the manifest content of what is spoken and presented as well as deriving insights into the dynamics that motivate the person in daily life. Through readings, classroom discussion, case presentation and individual research, this course will explore the many forms of symbolic communication in children and adults and how trauma impacts its expression.

### **GPSA 828 The Psychodynamics of the Family Life Cycle - 3 credits**

The family life cycle is a series of developmental stages that a family moves through over a lifetime, from infancy to older age. Each stage affords the individual new skills and challenges which requires coping with change. Intrapsychic development is established and catalyzed by family relationships and patterns. Environmental, intergenerational and cultural factors can impact the family constellation and functioning.

# ICPS Financial Information

## Good Financial Standing

Students are required to submit a satisfactory tuition payment in order to be admitted to class. Tuition can be paid by personal check, the extended payment plan or in full by credit card on either VISA or Master Card. Students should make payments in full in order to remain in good financial standing. Students whose extended payment plan payments are not honored may lose their good financial standing.

Students who are not in good financial standing are not permitted to attend class until the situation is rectified. These absences may be counted as unexcused absences by the instructors. All students with outstanding balances at the end of the semester will be assessed a 1% per month financial charge until the balance is cleared. Additionally, the Boston Graduate School of Psychoanalysis may withhold diplomas, degrees, transcripts and other official notice of work done at the School from students who are not in good financial standing. A student may not withdraw in good standing or graduate until all obligations to the school are paid in full.

## Extended Payment Plan

Under this plan, the full tuition may be equally divided into five payments according to the extended payment plan contract. The application for the extended payment plan is provided with the registration materials and is submitted with the registration form. The student submits five post-dated checks representing the five calculated payments. There is a \$100.00 fee for this service, paid at the time of registration. The first payment is due with registration. There will be a \$15 late fee for each late payment.

## Types of Financial Aid

Please contact Ms. Stephanie Woolbert, our Director of Financial Aid, at woolberts@bgsp.edu or 617-277-3915 x19. BGSP-NJ for information on loans & offers of grants when available.

Inquiries may be directed to Ms. Loretta Calabrese by phone 973-629-1001 or LCalabrese@acapnj.org

## Veterans Education Benefits

The New Jersey campus has been approved by the Department of Veterans Affairs for students to claim their Veteran's Education Benefits. For more information, please contact the Financial Aid Office or visit: <http://www/gibill.va.gov>.

## Tuition and Fee Schedule 2021-2022

### **Program Tuition and Fees:**

Tuition for all courses per credit ..... \$830

### **Administration Fees:**

Registration ..... \$150

Curriculum Support ..... \$360

Technical support ..... \$100

Extended Payment Plan ..... \$100

    Late fee ..... \$15

Late Payment ..... \$150

Returned check ..... \$25

Official transcript ..... \$20

Leave of absence (includes technical support) ..... \$250

    w/continued access to library resources additional ..... \$360

Graduation fee ..... \$250

### **Refund Schedule**

Approved drop in writing before first class ..... 100%

Approved drop in writing before second class ..... 75%

Approved drop in writing before third class ..... 50%

Approved drop in writing before 4<sup>th</sup> class ..... 20%

Drop on or after fourth class ..... no refund

# Credit Card Payment

Institute of Counseling and Psychoanalytic Studies

301 South Livingston Avenue  
Livingston, NJ 07039

973 629 1001

*Credit card payments are accepted for tuition being paid in full*

Student Name \_\_\_\_\_ ICPS Program \_\_\_\_\_

Card Holder Name (if different) \_\_\_\_\_

Card Holder Address \_\_\_\_\_

Amount\* \$ \_\_\_\_\_

Date \_\_\_\_\_

Office Use Only Authorization Code _____
Date _____
By _____

Card Holder Signature \_\_\_\_\_

*\* Some credit card companies have security policies that do not process large transactions, such as tuition payments, unless they have been previously notified by the cardholder that (s)he wishes to make such a payment.*

.....

Credit Card Type (circle one)      **VISA**      **MASTERCARD**

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Verification ID# (VIN) \_\_\_\_\_  
(Last 3 digits on BACK of card)

A non-refundable convenience fee up to 2.75% on the total transaction will be assessed by your credit card company for credit card payments.

ICPS Semester / Year \_\_\_\_\_





As you prepare to begin your studies at ICPS, I am available to answer any questions that you may have about student loans or financial aid in general. My office is located at the main campus in Boston, and I am in the office Monday through Friday from 9am-5pm. Give me a call at 617-277-3915 or send an email to [woolberts@bgsp.edu](mailto:woolberts@bgsp.edu) or [financialaid@bgsp.edu](mailto:financialaid@bgsp.edu). Our website also provides an overview of the types of aid available, at: <http://nj.bgsp.edu/admissions/financial-aid/>.

If you are interested in borrowing Federal Student Loans through the William D. Ford Direct Loan program to help finance your education, application directions are included below.

### How to Apply

The first step is to complete the Free Application for Federal Student Aid (FAFSA) online using your Federal Student Aid ID number. The FSA ID serves as your electronic signature when completing the FAFSA. If needed, you may apply for a new FSA ID online: <https://fsaid.ed.gov/npas/index.htm>. Then, complete your 2017-2018 FAFSA application online at [www.fafsa.ed.gov](http://www.fafsa.ed.gov) using your **2015** Federal Income Tax Return [Note: this is likely not your most recent tax return, but the prior year return]. Make sure to keep copies of all application forms.

*The FAFSA school code for BGSP-NJ is G31943, with the state listed as Massachusetts, and the city listed as Brookline.*

You are also required to complete Student Loan Entrance Counseling at [www.studentloans.gov](http://www.studentloans.gov). From the homepage you can sign in using your FSA ID. Then, you will be directed to a secure page where you can choose to complete entrance counseling. Read through the instructions, and then choose to complete your entrance counseling as a graduate student. When prompted, select *Massachusetts* as the state and *Boston Graduate School of Psychoanalysis* as your school. The session takes about 30 minutes and confirmation of completion is sent electronically to the school.

Finally, you will need to sign a Master Promissory Note (MPN), if you do not already have one on file. To e-sign the MPN, visit [www.studentloans.gov](http://www.studentloans.gov). Once signed in, select the option to e-sign your MPN. Depending on the loans you plan to borrow for the 2017-18 year, you will need to sign the Subsidized/Unsubsidized Stafford MPN, the PLUS MPN, or both. When prompted, choose *Massachusetts* as the state, *Brookline* as the city, and *Boston Graduate School of Psychoanalysis* as your school. If you prefer a paper copy, please contact me.

Please contact me if you would like to apply for a Graduate PLUS loan for 2017-18, or if you have any questions.

Best wishes for a successful school year,

Stephanie Woolbert  
Director of Financial Aid  
BGSP ♦ NYGSP ♦ BGSP-NJ  
1581 Beacon St, Brookline, MA 02446  
[financialaid@bgsp.edu](mailto:financialaid@bgsp.edu)  
(617)277-3915

**Checklist for your financial aid application:**

- ✓ 2017-18 FAFSA
- ✓ Entrance Counseling
- ✓ Master Promissory Note
- ✓ Non-Tax Filer Statement (if applicable)

# Extended Payment Plan

Institute of Counseling and Psychoanalytic Counseling

301 South Livingston Avenue, Livingston, NJ 07039  
Phone 973 629 1001 Email LCalabrese@acapnj.org

## Extended Payment Plan

Under this plan, the full tuition may be equally divided into five payments. The application for the extended payment plan is provided with the registration materials and is submitted with the registration form. The student submits five post-dated checks representing the five calculated payments. There is a \$100.00 fee for this service, paid at the time of registration. The first payment is due with registration.

Student Name \_\_\_\_\_

Program \_\_\_\_\_ Semester \_\_\_\_\_

Total Tuition \_\_\_\_\_ & Payment Plan Fee \$100 = \_\_\_\_\_

Payment Number	Payment Due (All Payments due on the 15 <sup>th</sup> )	Check Number	Amount
1			
2			
3			
4			
5			
		<b>TOTAL</b>	

*Please make checks payable to **Boston Graduate School of Psychoanalysis***

Post-date and submit all checks with registration to the ICPS Registrar

*By signing below, I agree to the terms and conditions of the Extended Payment Plan*

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Registrar \_\_\_\_\_ Date \_\_\_\_\_

# The Paulette Katz Memorial Scholarship Application

The Paulette Katz Memorial Scholarship is being offered by the Lipsey family in memory of their Aunt Paulette Katz. This scholarship will be awarded to a student in the ACAP Certificate program or the ICPS Master of Arts program. The purpose of this scholarship is to assist students who have educational financial needs. ACAP or ICPS students are invited to apply.

The following must be submitted by email to [acapnj@acapnj.org](mailto:acapnj@acapnj.org) **no later than July 1, 2021:**

1. Completed scholarship application.
2. A statement describing your professional goals, financial need & any other reasons for seeking this scholarship.
3. A letter of recommendation from an ACAP/ICPS faculty member. New students may include a letter of recommendation from an instructor from a previous school.

*This form is in a fillable format. Save to your computer, complete, save again, and ready to email.*

<b>Student Information</b>			
Full name			
Full address			
Email			
Phone number			
Undergraduate degree	School	Major:	Year:
Graduate degree	School	Major	Year:
Current employment description:			
Clinical/Professional experience			
How did you learn about ACAP / ICPS			
<b>Academic Plan</b>			
Level of study Certificate or Master of Arts			

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please email this application & supporting documents to the Paulette Katz Scholarship Committee at [acapnj@acapnj.org](mailto:acapnj@acapnj.org) no later than the July 1st deadline.**



Dear Incoming Student,

Congratulations on your acceptance to ICPS. All new graduate students enrolled in a program of study to an academic independent institution of higher education in New Jersey are **required** to provide evidence of immunization as a prerequisite to enrollment and proof of health insurance.

- **Measles, Mumps, Rubella (MMR) – 2 doses.** Any student born after 1956 **must provide** vaccination documentation of two (2) doses of MMR. The first dose must be administered on or after your first birthday and the second dose must not be administered any less than one (9) month from the first. *Laboratory blood tests that demonstrate immunity may be substituted in place of vaccination documentation. We must receive a copy of the blood work results in order to verify immunity.*
- **Hepatitis B – 2or3 dose series.** NJ State law requires all new incoming students registered for 12 or more credits must provide **must provide** proof of a completed Hepatitis B vaccine series. This can either be the two (2) dose adolescent series or the three (3) dose pediatric/adult series. *Laboratory blood tests that demonstrate immunity may be substituted in place of vaccination documentation. We must receive a copy of the blood work results in order to verify immunity.*

A request for exemption from these requirements due to religious beliefs may be submitted to the administrative office. **The request must be in writing from the enrolled student and specifically state the religious doctrine that prohibits the vaccination.**

Exemption from requirements based on medical reasons must be submitted to the administrative office in the form of a **signed statement from a healthcare provider** indicating a specific immunization is contraindicated due to a valid medical condition. This documentation will be reviewed annually.

Immunization documentation should be mailed to the ICPS Administrative office. Students who do not comply will have a registration hold placed on their account until documentation is received. Please review all documents to ensure they are correct and complete prior to submitting them. Any questions please call Loretta Calabrese at 973-629-1001.

**Deadlines:**

**All documentation must be received by:**

April 15th for the summer semester

August 1st for the fall semester

December 1st for the spring semester

### Student Record of Immunization

Student Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Student Address \_\_\_\_\_

The following information must be completed by your healthcare provider, high school, former college/university or any other authorized agency. An attached copy of official immunization records is also accepted.

**1. MMR required by law for all students born after 1956 :**

**MMR (Measles, Mumps, Rubella) vaccine-** 2 doses required.

**Dose#1** \_\_\_/\_\_\_/\_\_\_ (Given on or after 1 year of age)

**Dose#2** \_\_\_/\_\_\_/\_\_\_ (Given at least 30 days after dose #1)

**Or:**

**Titer Dose#1** \_\_\_/\_\_\_/\_\_\_ **Dose#2** \_\_\_/\_\_\_/\_\_\_

*Copy of Laboratory report **must** be attached*

**2. Hepatitis B required by law for all students registered for 12 or more credits per semester:**

**Hepatitis B vaccine** – Proof of a 3-dose series or a valid adolescent 2-dose is required.

**Dose#1** \_\_\_/\_\_\_/\_\_\_

**Dose#2** \_\_\_/\_\_\_/\_\_\_ Check box if 2-dose series (valid between ages 11-15 only)

**Dose#3** \_\_\_/\_\_\_/\_\_\_

**Or:**

**Titer Dose#1** \_\_\_/\_\_\_/\_\_\_ **Dose#2** \_\_\_/\_\_\_/\_\_\_

*Copy of Laboratory report **must** be attached*

Provider's Name \_\_\_\_\_

Address \_\_\_\_\_

Provider Signature \_\_\_\_\_ Date \_\_\_\_\_

*Return this form to:*

Institute of Counseling and Psychoanalytic Studies  
301 South Livingston Avenue, Livingston, NJ 07039  
Fax# 973-629-1003 Email: LCalabrese@acapnj.org

**BGSP-NJ**

# Health Insurance

The State of New Jersey requires all **full-time graduate students (9 or more credits)** to carry health insurance. Health insurance is required both to protect against unexpected high medical costs and provide access to quality care.

Student Name \_\_\_\_\_

Check one:

\_\_\_\_\_ I am enrolled in less than 9 credits and not required to participate in the health insurance requirements.

\_\_\_\_\_ I have health insurance and have provided information below.

Name of Insurance Company \_\_\_\_\_

Subscriber Name

Policy# \_\_\_\_\_

Student Signature \_\_\_\_\_

Date \_\_\_\_\_



Attach a copy of your card

# Record of Student Advisement

ACAP \_\_\_\_\_ ICPS \_\_\_\_\_

Student Name \_\_\_\_\_ Semester \_\_\_\_\_ Year \_\_\_\_\_

Advisor Name \_\_\_\_\_ Meeting Date \_\_\_\_\_

Student File Reviewed? \_\_\_\_\_ Goals Reviewed? \_\_\_\_\_ Registration Reviewed? \_\_\_\_\_

## Student approved to register for the following courses:

Course ID & Title \_\_\_\_\_ Semester \_\_\_\_\_

Course ID & Title \_\_\_\_\_ Semester \_\_\_\_\_

Course ID & Title \_\_\_\_\_ Semester \_\_\_\_\_

Course ID & Title \_\_\_\_\_ Semester \_\_\_\_\_

Course ID & Title \_\_\_\_\_ Semester \_\_\_\_\_

Course ID & Title \_\_\_\_\_ Semester \_\_\_\_\_

## ADVISOR COMMENTS AND RECOMMENDATIONS

Please list all specific recommendations made to students concerning any aspect of their progress in the ACAP training program. Students should review comments and recommendations of the Advisor. Please attach more sheets as needed. Place the Record Advisement Form in the student file.

**Student Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Advisor Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

## CONFIRMATION OF ANALYSIS

ACAP \_\_\_\_\_ BGSP-NJ \_\_\_\_\_ Semester \_\_\_\_\_ Year \_\_\_\_\_

Personal analysis with an approved analyst must begin by the second semester and is required throughout training. Students are responsible for the completion and submission of the Confirmation of Analysis form at the beginning of the fall and spring semester of each school year. Students are encouraged to remain in analysis as long they are in the program of study.

### Individual Analysis

Student's Name \_\_\_\_\_

Analyst's Name \_\_\_\_\_

Total Number of Individual Sessions since Last Semester's report \_\_\_\_\_

Total Number of Individual Sessions to Date \_\_\_\_\_

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Analyst Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

### Group Analysis

Total Number of Group Sessions since Last Semester's Report \_\_\_\_\_

Total Number of Group Sessions to Date \_\_\_\_\_

**Student Signature** \_\_\_\_\_

**Analyst Signature** \_\_\_\_\_

**Date** \_\_\_\_\_





New students only unless returning students have changes

## ACAP/ICPS EMERGENCY CONTACT AND CURRENT MEDICATION INFORMATION

### STUDENT/FACULTY INFORMATION

<b>Name:</b>	<b>Date of Birth:</b>
--------------	-----------------------

<b>Home Address:</b>	<b>Home:</b>
<b>Mailing Address:</b>	<b>Cell:</b>

Physician(s):	Physician's Phone Number:	Hospital Preference	Hospital Address/Phone

### EMERGENCY CONTACTS

NAME	RELATIONSHIP	HOME PHONE	MOBILE PHONE	WORK PHONE

**Are there any health considerations you would like us to be aware of?**


### ALLERGIES TO MEDICATIONS

MEDICATION	REACTION



**ACAP**

**Academy of Clinical  
and Applied Psychoanalysis**

973-629-1001 [www.acapnj.org](http://www.acapnj.org)

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*Post Graduate Programs*

973-629-1001 [www.ni.bgsb.edu](http://www.ni.bgsb.edu)



**Institute of Counseling  
and Psychoanalytic Studies**

— **New Jersey's BGSP Campus**

### ***Photo Release Form***

I grant to ACAP and ICPS its representatives and employees the right to take photographs of me and my property in connection with the above-identified subject. I authorize ACAP, to copyright, use and publish the same in print and/or electronically.

I agree that ACAP may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I have read and agree to the above:

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed name \_\_\_\_\_

## 2021 – 2022 Semester Dates

### **Summer 2021**

5/25 – 7/29

### **Fall 2021**

8/30 – 12/23 (exam week no class)

*no class*

11/23-11/25 Thanksgiving

9/15 Yom Kippur discretion of instructor

### **Spring 2022**

January 17 – May 12 (exam week no class)

*no class*

Spring break 3/14-3/17

### **Summer 2022**

May 24 – July 28 (exam week no class)

### **Fall 2022**

August 31 – Dec 26 (exam week no class 12/19-12/26)

*no class*

Labor Day 9/5

Thanksgiving 11/23-11/24

# Registration Checklist

*All registrations must include the following:*

- Registration form signed by advisor**  
New students may meet with the Admissions Director for their first term advisement.
- Advisement form**  
New students may meet with the Admissions Director for their first term advisement.
- Immunization form** (New students only)
- Proof of Health Insurance** (New students only)
- Payment** (check/extended payment plan/credit card)  
Registration is processed when fees are paid in full or an extended payment contract is provided. A credit card payment form is available for students who wish to pay by credit card.
- Confirmation of Analysis Form**  
All returning students submit a Confirmation of Analysis form.  
New students submit a statement once they have entered analysis.

Incomplete forms will be returned to the student and delay both registration and admission to class. Registration is complete when all required forms are received with payment.

Please be sure to avoid the late fee and register on time 😊

Any questions regarding registration please contact the ICPS Registrar:

Loretta Calabrese LCalabrese@acapnj.org