

# S:t Lukas utbildningsinstitut vid Ersta Sköndal högskola

Box 11189, 100 61 Stockholm. Tel 08-555 050 46.

Application to **Three Year Core-group in ISTDP** starting February 20-22, 2015

Name: .....

Mailing address .....

Country .....

Date of birth: ..... Swe/Personnr: .....

Mobile: ..... E-mail address.....

.....  
Place and Date Signature

**Current job** .....

Employed since .....

**Licensed psychologist, year:** ..... Enclosure/Annex

**Licensed psychotherapist, year** ..... Enclosure/Annex

**Psychotherapeutic work after licence** (employment in %) ..... Enclosure/Annex

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**Pre Core Education**      **Yes**                      **No**

**Psychodynamic Personal Psychotherapy** (hours) .....

**Personal ISTDP therapy** (hours) .....

**Supervision after licence** ..... Enclosure/Annex

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