

ADMISSIONS FORM
Prior Learning Assessment & Recognition (PLAR)

Last Name:

First Name:

Address:

City:

Prov.:

Postal Code:

Phone:

E-mail:

Date of Birth (dd/mm/yr) :

Gender: I identify as

Female

Male

First language spoken:

Do you read, write and converse in English?

Read

Write

Speak

1. Prior Psychotherapy & Related Experience: I.

Personal Therapy:

a) Have you been in therapy before?

Yes

No

b) How long have you been in personal therapy?

Years: _____ Approx/hrs: _____

c) Who was / is your therapist?

Name: _____

II. Group Therapy:

a) Have you been in group therapy before?

Yes

No

b) How long have you been in group therapy?

Years: _____ Approx/hrs: _____

c) Who was the facilitator?

Name: _____

3. Artistic projects and productions (exhibitions, community art projects, etc.)

| Year(s) | Description of creative products: |
|---------|-----------------------------------|
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4. Additional academics tests and scores of relevance (English language scores such as TOEFL, and academic scores such as SAT, GPA). -*International Students*

| Years(s) | Title of test(s)/Score(s) | Grade Attained |
|----------|---------------------------|----------------|
| | | |
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5. Assess your ability to Read, Write and Speak in English

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6. Additional Background Information About You
Essay or Personal/Professional Readiness: (relevant to being educated as an expressive arts therapist)

[Empty box for writing the essay or personal/professional readiness statement.]

12. Please write a short autobiography approximately 2 or 3 pages:

AUTOBIOGRAPHY: if you need more space, please attach to end of document in word file.

13. Please provide three references in the following areas: personal, work or any volunteer work or work related to the helping professions. Please provide information below and have your references fill out the Reference Form attached at the end of this application and have them return, by email, to admin@thecreateinstitute.org

| Name: | Phone Number: | Email: |
|-------|---------------|--------|
| | | |
| | | |
| | | |

APPLICATION FEE: \$150.00 (Please make cheque payable to The Create Institute)

Method of payment: Cheque or moneyorder or bankdraft: Cash:

The Create Institute will evaluate the PLAR to see if their background qualifies them for acceptance as BA-equivalent candidates. If this is the case, they will be contacted for interviews in the same manner as candidates with BA's. If the PLAR shows that they do not qualify for BA-equivalency, they will be charged \$50.00 for the PLAR review process, but \$100 of their application fee that would otherwise go towards interviews will be returned.

Please mail all materials to the following address:
(Unfortunately applications cannot be accepted by commercial courier or hand delivery)

The Create Institute
Attn: Pamela Rosales
P.O. Box# 31046, 725 College St., Toronto, Ontario, Canada, M6G 1C0
T:(416) 539-9728 F: (416) 531-8236 E: admin@thecreateinstitute.org

ATTACH RELEVANT VERIFICATION DOCUMENTS
(Degrees, RN license, test scores, CV, etc.)*

***We will accept scanned versions of these documents**

Certification of Information:

I certify that all statements on this application and within the attachments are correct and complete.

Signature: _____

Date: _____

Professional Reference Form:

In order to begin the interview process we require three letters of reference. These letters should be from individuals who have known you over a period of time and are able to comment on your personal and professional readiness for this training (e.g. working professionals, colleagues, your therapist). One of the letters must be from a current or former employer.

- 1. How long have you known the candidate?**
- 2. What is the nature of your relationship?**
- 3. Please describe your association with the candidate and the extent of your knowledge of his/her character and work as it pertains to the practice of Expressive Arts Therapists/Psychotherapist. How would you describe the candidate's character, work ethic, and skills that are relevant to the profession of counseling/psychotherapy?**
- 4. Would you describe the candidate as responsible/reliable?**
- 5. Would you recommend this person to the field of Expressive Arts Therapists/Psychotherapist? Why or why not.**
- 6. Do you have any reservations about this candidate regarding her/his suitability as a psychotherapist? Yes No**

Please explain if Yes:

- 7. What would be some challenges for this candidate in training to become an Expressive Arts Therapists/Psychotherapist?**
- 8. Is there anything else that you would like to add or that you think we should know in considering this person for our program?**