



Anatomy of Intimacy Workshops Couples Therapy Clinical Training

Scholarship Application

Program for which you are applying (you may apply for only one).

Robert Navarra October 21, 2017
(due by October 2, 2017)

Alexandra Katehakis December 2, 2017
(due by November 10, 2017)

Andrew Christensen March 3, 2018
(due by February 9, 2018)

Janis Abrahms Spring April 7, 2018
(due by March 16, 2018)

Name: _____

Email: _____ Phone: _____

Address: _____

Profession and Degree: _____

Current Clinical Work Setting or graduate program: _____

Please answer the following four questions on a separate sheet:

Try to be specific about any coursework or experience you have had with couples (for example, for coursework, name the institution/organization, whether the course was part of your degree or continuing education, the general topic of the course, instructor, and any research topics you pursued as part of the course). Experience: how much experience you have had with couples, how your practice/career would be enhanced by learning more about couples therapy, what the context was of your experience with couples (private practice, community outreach, home visitations, etc.).

1. What, if any, coursework have you had in Couples Therapy?
2. What clinical experience have you had working with couples?
3. What is your interest in taking this training?
4. What is your financial situation that makes paying the tuition a hardship?

Completed forms should be mailed or faxed to:

Dr. Judith Zucker Anderson
Foundation for the Contemporary Family
15615 Alton Parkway, Suite 220
Irvine, California 92618

Fax: 949.494.0865

You may also **email** your responses to: **zoanna@drjudithanderson.com**

Please remember to include the contact information requested above.

If you have any questions, please email ZoAnna at the address above or call 949.464.0131