



The Guild of Analytical Psychology and Spirituality

Patron: Sonu Shamdasani

4 Ennerdale Road Reading RG2 7HH
t: 0118 922 2993 e: admin@gaps.co.uk

APPLICATION FOR OXFORD 'EXPLORING JUNG' COURSE

1 Applicant Details

Name _____

Address _____

Post Code _____ Home Phone _____

Mobile _____ Work Phone _____

Email address _____

Date of Birth _____ Nationality _____



Company Registered in England No 325274; Registered Charity No 1058818; UKCP registered

2 Personal therapy (if any)

Name and address of therapists	From	To	No of hours
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3 Group therapy (if any, please give full details)

4 Have you ever had psychiatric treatment or been hospitalized for mental or psychological illness? If yes, please give details

5 University or Higher Education

Institution received	Dates	Class/type of Degree
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6 Please explain briefly why you would like to do this particular course

Signed _____

Date _____

Notes

- a) there is a minimum of 5 students required for the course to run
- b) concessions may be available
- c) on completion of the course a certificate of attendance will be given
- d) GAPS reserves the right to refuse an application