Prairie Institute of Expressive Arts Therapy
1528 12th Ave SW, Calgary, Alberta T3C 0P9
Phone: (403) 245-5553 ext. 15 Fax: (403) 245-8339 email: carmenr@telusplanet.net www.pieat.ca

Application Form Expressive Arts Training: Level 2 Certificate July

Application Deadline: March 31 **Space is limited - Registering early is recommended**

 Program Stream Applying for: (check one) () Clinical () Consultant/Educator 			
2. Personal Information			
Name:	Date of Birth:		
	Postal Code:		
Phone: (H)	(C)		
Email:			
3. Work Information			
Profession:	Present Occupation:	_	
Place of Employment:			
Title:			
Address:			
Phone:			

4. Emergency Contact

Name:	Relationship:	
Address:	Phone:	
5. Post Secondary Education		
Degree		
Degree Date of graduation Name of institution		
Name of institution		
Course of Study		
Degree		
Degree Date of graduation		
Name of institution		
Course of Study		
6. List All Other Training Programs	Attended	
Name and location of school		
Name and location of school Attendance dates from	until	
Certificate earned (if applicable		
Name and location of school		
Name and location of school Attendance dates from	until	
Certificate earned (if applicable)		

7. Written Statement

Please attach a 2-4 page statement outlining the following:

- How have you incorporated the learning from Level 1 in your professional life?
- Describe your learning goals for taking Level 2.
- Are you currently engaged in a personal arts practice? If yes, please describe.
- Which of the expressive arts modalities do you feel confident with using professionally? What are your areas of growth with the expressive arts?

8. Additional Information Required

• Current Resume

9. Tuition Fee - \$2500

- application due date is March 31
- \$200 due at the time of submission of this application (non-refundable)
- payment fee schedule for the remainder 3 monthly installments beginning in May, June, July

Make cheque payable to Prairie Institute of Expressive Arts Therapy

10. Interview

• An admissions interview will be arranged by phone once your application is received and reviewed.

I certify that the information given on this application is complete and accurate.

Print Name:		
Signature:	Date:	

**Prairie Institute reserves the right to increase tuition and fees at their own discretion and will give notice at least 100 days in advance of program starting.

Mail completed application to:

Prairie Institute of Expressive Arts Therapy 1528 12th Ave. SW Calgary, AB T3C 0P9