THE NEW YORK INSTITUTE FOR PSYCHOTHERAPY TRAINING
*In Infancy, Childhood and Adolescence*
**3701 Bedford Avenue**
**Brooklyn, New York 11229**

# LETTER OF AGREEMENT

**AS A CANDIDATE IN THE NYIPT PROGRAM, I ACCEPT THE THREE-YEAR COMMITMENT AND AGREE TO:**

**I. Program Commitments:**

a. To attend and satisfactorily complete a two-hour class each week as per current SCHEDULE OF CLASSES from September through June.
b. To attend weekly supervision from September through July and receive a satisfactory evaluation.
c. To attend all required workshops and meetings.
d. To complete clinical work in a professional manner, satisfactory to the clinic or school involved, consisting of 5 weekly patient sessions plus one parent collateral session (45 minutes each) (see Patient Commitments below).

**II. Patient and Tuition Commitments:**

a. In the first year of the program, I will complete 120 "kept" therapy hours. In the second year, 180 "kept" clinic hours are needed to advance to the third year, and in the third year, I will complete 200 "kept" clinic hours.
b. I understand that the tuition is $3,000/year with half owed upon beginning in September and the balance is due in the beginning of January for the second semester.
c. I understand that as a therapist/candidate, I must also fulfill any clinic/school requirements mandated by the clinical placement, including all required paperwork and any other requirements expected of a therapist.

**III. Personal Therapy Commitment:**

I understand that over the three years a minimum of 200 hours of dynamically oriented psychotherapy with an approved therapist is required prior to graduation (or 50 additional hours if I have had 200 hours of approved therapy in the past). I know that therapy on a twice a week basis is recommended, and it is possible that I may be required to complete additional therapy in order to continue in the program if deemed necessary. I know that I am responsible to pay for my personal therapy.

**IV. Evaluation:**

I understand that my continuing in the program will be evaluated by a committee of faculty each year, to determine my eligibility to enter the next year and to complete the program. Professional conduct is expected in accordance with Institute and Professional guidelines.

**V. Pledge:**

I hereby state that there are no disciplinary proceedings or other legal actions against me on a professional or personal level.

**UPON SIGNING THIS AGREEMENT, I WILL ENCLOSE A NON-REFUNDABLE DEPOSIT OF $150.00.**

**Signed:** _____
Candidate (Child and Adolescent Training Program) Date

_____
Program Director (Child and Adolescent Training Program) Date