



Internal
Family
SystemsSM

THE CENTER FOR SELF LEADERSHIP
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APPLICATION FORM
Boston (#174) IFS Level 2 Training
Begins on December 11, 2009

To apply, **fax, mail, or email** (training@selfleadership.org) this application form **by November 9, 2009** with credit card information (see above for contact information). Upon receipt, your credit card will be charged a non-refundable **\$30 application fee**. Once you are accepted, a **\$500 deposit** will be charged to your card to secure your place in the training. In the event that all spaces are filled, your card will not be charged. **Tuition is \$2500 total**. Please choose a payment plan below. If you do not select a payment plan your card will be charged the full tuition on **December 1, 2009**. **Spaces are limited, so apply early!**

1. Please provide BOTH your Contact Information and Billing Information to ensure the processing of your application.

CONTACT INFO:

Name: _____ Credentials: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (H) _____ (W) _____

Email: _____

BILLING INFO:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Credit Card Type (VISA/MC): _____

Card #: _____ Exp.Date: _____

(Please provide ALL credit card info, even if it's already on file.)

2. Payment Plan Options: All payment plans start **December 1, 2009**

- Payment Plan 1:** \$2000 (full tuition - deposit)
- Payment Plan 2:** Two payments of \$1025, 6 months in between payments (full tuition – deposit + \$50 carrying fee)
- Payment Plan 3:** Monthly payments of \$350.00, total of 6 monthly payments (full tuition – deposit + \$100 carrying fee)

Cancellation/ Refund Policy: A \$500 deposit is charged upon acceptance. It is transferable to another program if you withdraw 44-15 days before the program begins (if used within 18 months), and is forfeited if withdrawal occurs 14 days or fewer before the program begins. Tuition payments required upon withdrawal are as follows: After Session 1: 1/4 remainder of tuition (full tuition less deposit) plus any carrying fee; after Session 2: 1/2 remainder of tuition (full tuition less deposit) plus any carrying fee; after Session 3: full tuition plus any carrying fee. Participants are responsible for payment for sessions attended or missed prior to withdrawal.

By signing below, you authorize The Center for Self Leadership to automatically charge your credit card according to the specific dates and dollar amounts listed on that plan. **Please keep a copy of the Payment Plan Agreement for your records, and note that tracking payments is your responsibility;** receipt of payments will not be sent. By signing below, you acknowledge that you have read and understood the risks of entering into Internal Family Systems with a Dual Relationship (see page 2) and take full responsibility for any issues that may arise in regard to Dual Relationships and that any Dual Relationship issue does not exempt you from fulfilling your payment agreement as specified above.

Signature: _____ Date: _____

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3. Please provide the following information about your previous IFS training(s):

A. Location, Lead Trainers and Graduation Date for Level 1:

B. Other IFS training(s) and experience:

4. Dual Relationships:

The Center for Self Leadership is committed to creating a safe container for all trainings and seeks to do everything possible to maintain the safety and ethics of our highly experiential Internal Family SystemsSM Training Programs. To that end, we are sensitive to the potential difficulties of any type of dual relationship between trainer and participant or participant and participant. Therefore, we recommend you review the roster for your program (if not enclosed at this time, please wait until you receive it via email) and determine if you are in a dual relationship with anyone. If you are in a dual relationship, particularly supervisory or therapeutic, The Center for Self Leadership advises you to speak with that person before beginning the training. In order to respect the confidentiality of your dual relationship, please address the situation directly. Different states have different policies for counselors and therapists regarding dual relationships. Therefore, applicants and IFS Trainers are expected to take responsibility for checking with their particular state's governing policies and adhering to the professional standards for dual relationships as outlined by that state. Applicants to CSL trainings and IFS Trainers are also expected to adhere to the governing policies of their professional discipline regarding dual relationships.

Please contact The Center for Self Leadership if you have questions or concerns. The Center for Self Leadership's highest priority is to create and maintain safe and ethical learning environments.

Please (1) *review your application* to make sure all fields are filled in; (2) *make a copy for your records*; and (3) *send it* to The Center for Self Leadership. You may fax, mail, or email it. Applications that are missing information will not be processed.

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