

ADVANCED DIPLOMA APPLICATION FORM

Name:				
Date of Birth:				
Address:		Postal Code:		
Phone:	Email:			
EDUCATION				
University:	Degree:	Date:		
University:	Degree:	Date:		
EMERGENCY CONTACT				
Name:	Relationship:			
Address:		Phone:		
APPLICATON MATERIALS				
1. Transcripts verifying degrees sent directly from the	university		yes	no
2. 3 Letters of reference from educational and/or emp	loyment situation		yes	no
3. Personal autobiography emphasizing early life expe	riences (1-3 pages double-space	ed)	yes	no
 A statement explaining: Your current working situation. Your skills and experience applicable to this traini What training as an art therapist would offer you 			yes 🗌	no
5. A copy of your current CV or Resume			yes	no
6. 10 -12 images of your artwork/creativity (submitted	electronically or in print)		yes	no
 7. Checklist of courses completed (acceptance to the program is not dependent on courses completed) a) Abnormal Psychology b) Developmental Psychology c) Counselling Skills 8. \$75.00 Application fee (an email-transfer can be made to vatipayment@vati.bc.ca) yes 				