THE C.G. JUNG INSTITUTE
OF SAN FRANCISCO

James Goodrich Whitney Center for Psychotherapy

Internship Application 2027-2028

Name: _____

Address _____

_____

Best phone number to reach you: _____
including on Match Day, Friday, March 26, 2027, from 9am to 1pm

What are the best times to call? _____

Email address: _____

Psychology Doctoral Level Students (Please fill out):

School: _____

Enrolled for: _____ degree (PsyD, PhD.) in _____ psychology (clinical, etc.)

Year level as of September 2027: _____

When do you expect your degree *(please fill in all 3 possibilities, and indicate month and year)*:

Earliest could receive it: _____

Latest might receive it: _____

Best guess: _____

How many pre-doc internship hours will you have accumulated by September 2027? _____
(Please do not include practicum hours)

Will you have completed all Practicum hours required to begin Internship by September 2027? _____

Will you have completed all coursework for your PsyD, or PhD.? _____

List coursework expected to remain incomplete as of September 2027: _____

_____

Have you advanced to Candidacy? _____

Have you completed your comprehensive exams? _____

If not, when do you expect to complete them? _____

Do you have a Dissertation topic? _____ If so, what is the Title/Topic? _____

_____

Please indicate where you are in the dissertation process:_____

Masters Level Students (Please fill out):

School: _____

Enrolled for _____ degree in _____ psychology (clinical, etc.) in the

_____ (MFT/MSW/LPCC) degree track.

Year level as of September 2027: _____

When do you expect your degree *(please fill in all 3 possibilities, and indicate month and year)*:

Earliest could receive it: _____

Latest might receive it: _____

Best guess: _____

How many hours as a registered intern will you have accumulated by September 2027? _____

Have you completed all coursework for your Master's degree? _____

Do you have a Thesis topic? _____ If so, what is the Title/Topic? _____

_____

***Note to ALL APPLICANTS:* All academic training programs and degrees not listed above should be listed clearly on your attached CV.**

All Applicants (Please fill out):

Clinical Training - Summary of Clinical Experience

Number of intake interviews conducted: _____
Number of adult clients seen in short-term therapy (1-20 sessions): _____
Number of adult clients seen in long-term therapy (>20 sessions): _____
Number of child/adolescent clients seen in short-term therapy (1-20 sessions): _____
Number of child/adolescent clients seen in long-term therapy (>20 sessions): _____
Number of families seen in family therapy: _____
Number of couples seen in couples therapy: _____
Number of distinct psychotherapy groups facilitated: _____
Number of testing batteries* administered, scored and interpreted: _____
**(A battery should include both objective and projective tests)*
Number of assessment reports written: _____
Other experiences of note: _____

Languages: Please list all languages spoken other than English. Indicate your ability to work clinically in that language by also describing your level of fluency:

Personal Psychotherapy/Analysis (Name of therapist optional):

I am currently in personal Jungian analysis _____no _____ yes

If yes, please list: (approximate dates, approximate number of hours): _____

I am currently in personal Jungian-oriented psychotherapy _____no _____yes

If yes, please list: (approximate dates, approximate number of hours): _____

I am currently in other personal therapy _____no _____yes

If yes, please list: (approximate dates, approximate number of hours): _____

PREVIOUS Jungian Analysis or other Psychotherapy (Name of therapist optional):

I was in personal Jungian analysis _____no _____yes

If yes, please list: (approximate dates, approximate number of hours): _____

I was in other personal therapy _____no _____yes

If yes, please list: (approximate dates, approximate number of hours): _____

Please list any current (or recent) ongoing trainings you have been involved in and dates of your participation?

_____

Would you be able to be here on Mondays from 10:30am to 4:30pm and on either Tuesdays or Thursdays from 10:30am to 12:30 pm (days/times subject to change) for the weekly didactics, case conference seminars, community meeting, and supervision)?

Yes ___ No ___

Our internship year begins September 13, 2027 and is for 22 hours per week for 48 weeks. If approved by the intern's school, it usually is possible to arrange for a second year if the intern chooses to apply for it. At this point, is your best estimate that you would need and/or want a second year?

Yes ___ No ___

This is not required for the internship, but please indicate whether or not you have a clinical license and/or are in a psychological associateship and, if so, for how long and with whom:

AMFT/ASW/APCC: Yes _____ No_____

For how long? _____

With whom? _____

Psychological Associate? Yes _____ No_____
(formerly Psych. Assistantship)

For how long? _____

With whom? _____

Please list any other current or past licenses, certificates, or registrations that allow(ed) you to practice in any field of mental health, and the state in which it was issued:

_____

_____

Three Letters of Recommendation:

Please provide the name, phone number and email addresses of all individuals writing letters of recommendation in support of your application (Note: we do not accept letters from current or past therapists):

1. _____
2. _____
3. _____

Attestation

By signing below, I attest that all information provided herein (including attachments and separate submissions) is true to the best of my knowledge and that I have not intentionally misrepresented myself, my graduate or clinical training in any way. I understand that any intentional falsification, on this application or during any aspect of the internship application process, may lead to a withdrawal of consideration or dismissal from the internship program.

Furthermore, I agree to comply with the APA Ethical Principles of Psychologist Code of Conduct, the Laws and Regulations of the California Board of Psychology/Board of Behavioral Sciences, and the C.G. Jung Institute Ethical Standards and Code of Professional Conduct. By signing below, I also agree to comply with the rules and policies of the Whitney Center Internship Training Program and the C.G. Jung Institute of San Francisco.

I have read fully the information provided to me regarding the internship program to which I am applying, and agree to start the internship on the date specified in these materials.

_____ _____

Applicant Signature Date

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Please submit on separate sheets -- and attached to this application -- statements of no more than one page (double- or single-spaced):

1. In an autobiographical statement, please describe your relevant personal and professional development. As you reflect on your personal history, including your early family environment, what has contributed toward your choosing this path of becoming a depth psychotherapist?

2. What are the most difficult things you come up against in yourself in your work as a clinician-in-training?

3. A statement about your personal life at this time and how it impacts your pursuit of clinical training. (Please include personal relationships, outside interests, financial support and living situation, etc)

4. Please describe your theoretical orientation and how this influences your clinical work.

Please also include with this application:

- ☐ Cover letter (Letter of Interest)
- ☐ CV or resume

Separate submissions needed:

- ☐ Three letters of recommendation
- ☐ Official Graduate School Transcripts
- ☐ Letter of Eligibility and Readiness for Internship signed by Training Director (for Doctoral students)

Completed applications (including required attachments) are due in the office of The C.G. Jung Institute of San Francisco by Friday, February 5, 2027, 5:00 pm PST.