

REGISTRATION: Exam Further Education Program (FOA)

Examination period: Month _____ Year _____

Notice for registration: Please take note of the registration deadline. To register for exams, all requirements of the regulations have to be fulfilled; relevant records, practical trainings, evaluated papers have to be submitted to the secretary's office in time. All fees must have been paid.

Please fill in completely and in block letters.

Full name	
Address	
Telephone	Fax
	Email
Academic degree	Profession
Nationality	Mother tongue
	Other languages
Start of the further education program:	Regularly attended semesters (e.g. WS 12/13, SS 13)

Title of the Seminar Paper	Lecturer
--	----------------------------

	Exam	Examiner
E-Propi 110	Fundamentals of Analytical Psychology	

- I have applied to the examiner; the procedures according to the brochure „Further Education in Analytical Psychology“ are known to me.
- A copy of the seminar paper is enclosed.
- I have remitted the examination fee of CHF 300.

Please send to:
 C.G. Jung-Institut Zürich
 Studienadministration
 Hornweg 28
 CH-8700 Küsnacht

Place and date _____

Signature _____

CHOICE OF EXAMINER PRÜFERWAHL	Further Education Allgemeine Fortbildung
--	---

Please **PRINT** / Bitte in **DRUCKSCHRIFT**

Name/First Name:

Name/Vorname: _____

Phone/Tel.: _____

Email: _____

Subject / Prüfungsfach	Examiner Prüfer	date of contact with examiner / Datum Kontaktauf- nahme mit Prüfer
E-Propi 110 Fundamentals of Analytical Psychology / Grundlagen der analytischen Psychologie

Past and present personal analysts:

Vergangene und gegenwärtige persönliche Analytiker: _____

Date / Datum: _____

Signature / Unterschrift: _____