



WILLIAM GLASSER
INTERNATIONAL

Application to Attend Advanced Intensive Training

1 Personal Information:

Name: _____ Date: _____

Mailing address: _____

City, State/Province, Zip/Postal Code, Country: _____

Day phone: (_____) _____ Evening phone: (_____) _____

Fax: (_____) _____ E-mail: _____

Basic Intensive Training Dates: _____ Instructor: _____

Basic Practicum Dates: _____ Supervisor: _____

2 Application Process: *(Completion of this form confirms that participants attending an Advanced Intensive Training have fulfilled the necessary prerequisites [Basic Intensive Training and Basic Practicum] and have received coverification from their Basic Practicum Supervisor to attend.)*

Applicant Step 1: Complete this application, sign, date, and forward it to your Basic Practicum Supervisor. **Practicum Supervisor:** Complete co-verification, sign, date, and return to Applicant. **Applicant Step 2:** Remit Application to Organizer, along with your deposit made payable to organizer's designation. Balance of fees are due at commencement of your Advanced Intensive Training.

3 Applicant's Self-Evaluation:

1. Specific area(s) in which I describe my performance as quality: _____

Supervisor's Co-verification: _____

2. Specific area(s) in which I believe I need to improve the quality of my performance: _____

Supervisor's Co-verification: _____

I have successfully completed the requirements of the Basic Practicum & believe I am ready to attend my Advanced Intensive Training.

Applicant's Signature: _____ Date: _____

Supervisor's Signature: _____ Date: _____