



Application Packet



FOR PROGRAMS:

Master of Arts in Clinical Mental Health Counseling

Master of Arts in Psychoanalysis

Certificate in Mental Health Counseling

Non-Matriculated

Admission Requirements

ICPS welcomes applicants with baccalaureate and graduate degrees from all educational backgrounds. Applicants submit to the ICPS Administrative Office the completed application, fee and supporting materials listed on application. ICPS does not require the Graduate Record Examination (GRE) for admission.

Application Instructions

Please mail the completed application, the \$100 non-refundable application fee (made payable to BGSP), and all supporting documents to the ICPS/ACAP Administrative Office, 301 South Livingston Ave, Suite#202, Livingston, NJ 07039. The Admissions Committee will review applications once all materials have been received. ICPS offers admission on a rolling calendar basis. However, we do have priority application deadlines in order to insure that there is enough time to review your application.

Applicants who were educated outside of the United States also must submit their academic transcripts to a credential evaluation agency, such as the Center for Education Documentation, Educational Credential Evaluators or World Education Services, in order to allow the ICPS Admissions Committee to accurately assess their previous academic work. In addition to the evaluation, official graduate and undergraduate transcripts are required.

Please note: ICPS is not authorized under Federal law to enroll non-immigrant alien students.

Application for Admission

Check the program you are applying to:

- Master of Arts in Psychoanalysis (MAP)
- Master of Arts in Mental Health Counseling (MAMHC)
- Certificate in Mental Health Counseling
- Non Matriculated

Semester applying for _____

Insert photo here:

ALL MATERIAL SHOULD BE SENT TO:

ICPS/ACAP Administrative Office 301 So. Livingston Ave, Livingston, NJ 07039

Checklist:

1. Complete this application and return it to **ICPS** with the non-refundable application fee of \$100.00 **payable to BGSP**
2. Forward official copies of your undergraduate and graduate transcripts to the **ICPS** Administrative Office.
3. Two letters of reference (at least one academic), two letter-of-reference waivers (Family Educational Rights and Privacy Act of 1974 (FERPA). (MAP & MACMHC & Post MA only)
4. A one-page statement expressing your interest in studying at ICPS (MAP & MACMHC applicants only).
5. A writing sample, i.e. a term paper, article, or essay (MAP & MACMHC applicants only)
6. Applicants who are non-native speakers of English submit scores from the Test of English as a Foreign Language (TOEFL).
7. Applicants educated outside the U.S. must submit transcripts to a credential equivalency service such as:
Center for Education Documentation, Educational Credential Evaluators, World Education Services.

When all materials are received, two admissions interviews will be arranged.

Last Name: _____ First Name: _____ Middle Initial: _____

Male Female

Street Address: _____

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

Day Phone: _____ Evening Phone: _____ Cell Phone: _____

E-Mail: _____

Date of Birth: _____ Marital Status: _____ Social Security # _____

Citizenship: USA Permanent Resident: Yes No Status _____ Other (write name) _____

Name of Undergraduate School, Degree, and Date Degree Awarded _____

Name of Graduate School, Degree, and Date Degree Awarded _____

Other Learning Experience: _____

Current Employment: _____

Clinical/Professional Experience: _____

How did you learn about the ICPS program? _____

Date: _____ Signature: _____



Institute of Counseling
and Psychoanalytic Studies
— New Jersey's BGSP Campus

Letter of Reference #1

Give this form to the person who is writing your reference and ask them to send it with your reference to:
ICPS/ACAP Administrative Office, 301 South Livingston Ave, Livingston, NJ 07039

I hereby waive my rights to access this document under the Family Educational Rights and Privacy Act of 1974 (FERPA)

Applicant Name _____

Applicant Signature _____ Date _____

Reference Name _____ Phone _____ Email _____

Reference Signature _____ Date _____



Institute of Counseling
and Psychoanalytic Studies
— New Jersey's BGSP Campus

Letter of Reference #2

Give this form to the person who is writing your reference and ask them to send it with your reference to:
ICPS Administrative Office, 301 South Livingston Ave, Livingston, NJ 07039.

I hereby waive my rights to access this document under the Family Educational Rights and Privacy Act of 1974 (FERPA)

Applicant Name _____

Applicant Signature _____ Date _____

Reference Name _____ Phone _____ Email _____

Reference Signature _____ Date _____

Application Checklist

- Admissions Application
- \$100 non-refundable Application Fee payable to BGSP
- One-page statement of interest *(MAP & MACMHC applicants only)*
- Writing Sample e.g., term paper, article or essay *(MAP & MACMHC applicants only)*
- 2 Letters of Recommendation with signed waiver forms
(At least one recommendation should be academic and the other should be from professional sources)
- All official College/University Transcripts

UNDERGRADUATE _____

GRADUATE _____

For international applicants only:

- Evaluation from credential equivalency service if educated outside the U.S.
Applicants educated outside the U.S. must submit transcripts to a credential equivalency service such as:
Center for Education Documentation, Educational Credential Evaluators, World Education Services.

UNDERGRADUATE
Name of Institution

GRADUATE
Name of Institution

OTHER INSTITUTIONS ATTENDED IN WHICH YOU MAY NOT HAVE EARNED A DEGREE BUT ATTEMPTED OR COMPLETED COURSES