

Northeastern Society for Group Psychotherapy

Experiential Group - Application Form

March 30, 2011 – June 22, 2011

Name: _____

Address: _____

Telephone: Day _____ Evening _____ Email _____

Professional Discipline: _____ Degree: _____

Current Position: _____

Agency and Address: _____

If currently leading group(s), describe: _____

How did you learn about the experience group: _____

The group will meet on Wednesday mornings from 8:00-9:15. The group will be led by Cecil Rice, Ph.D., CGP, DLFAGPA at his office in Needham. The first group meeting will be on Wednesday March 30, 2011. The final group will meet on Wednesday June 22, 2011.

Tuition: \$350 (payable in full by March 1, 2011) Partial scholarships may be available through the NSGP Foundation. CEs will be available.

Please make checks payable to NSGP, and remit to **Northeastern Society for Group Psychotherapy, Inc., PO Box 356, Belmont, MA 02478**

Refund policy: Tuition credit will only be given if cancellation is made two weeks (14 Days) prior to the initial meeting.

For more information call NSGP: (617) 484-4994, or email to: groups@nsgp.com