

ACAP Clinical Supervision Course Offerings
Please Print Neatly

Name: _____ Date: _____

Address: _____ Town: _____ Zip Code: _____
(Please indicate if this home or office)

Home/Cell Phone: _____ Work Phone: _____ Email: _____

Employer: _____ Job Title: _____

Please check which you are registering for:

_____ **SOCIAL WORKERS - 20 Hour Clinical Supervision Course, \$450 +**
Includes ethics (5) and cultural competency credits (5)
Approved by the NJ Social Work Examiners Board
Sunday, January 20 - 8:00am – 6:30pm
Monday, January 21 - 8:00am – 6:30pm
Lunch will be provided

_____ **COUNSELORS - 45-hour Clinical Supervision Course, \$525**
Includes ethics (5) and cultural competency credits (5)
Sunday, January 20 & Sunday, January 27 - 8:00am -6:30pm
Monday, January 21- 8:00am – 1:00pm
Sunday, February 3 & 10 – 8:00am – 6:30pm

Academy of Clinical and Applied Psychoanalysis (ACAP) is an NBCC- Approved Continuing Education Provider and may offer NBCC-approved clock hours for events that meet NBCC requirements. ACAP is solely responsible for all aspects of the program. Lunch will be provided.

_____ **ART THERAPISTS - 35-hour Clinical Supervision Course, \$480**
Includes ethics (6) and cultural competency credits (5)
Sunday, January 20 & Sunday, January 27 - 8:00am -6:30pm
Monday, January 21 – (7:00 – 8:00am) 8:00-1:00pm
Sunday, February 3 – 8:00am– 6:30pm

All training hours are applicable towards the educational requirements for the art therapy credentialed supervisor credential (ATCS) and maintenance of The Art Therapy Board Certification (BC)

_____ **Half day \$100** _____ **Full day \$175**
Sunday, January 21
8:00am - 1:00pm -Ethical Issues in Clinical Supervision
1:30pm - 6:30pm - The Influence of Culture in Clinical Supervision
Approved by the NASWNJ

SPECIAL TOPIC: INTEGRATING THE CREATIVE ARTS INTO SUPERVISORY PRACTICE
with one hour on ethical issues 7:00-8:00am
Monday, January 21- 8:00am – 1:00pm
Approved by the NBCC (#5709)

I request CEUs for:

___ Social workers ___ Counselor/AT ___ Other ___ Indicate affiliation ___ Certificate of Attendance

Checks are made payable to ACAP and mailed to 301 S. Livingston Avenue, Livingston, NJ 07039

Check amount and number _____