



Supplementary Application Foundations of Psychedelic Psychotherapy

Registrar's Office
222 St. Patrick Street, Toronto ON M5T1V4
admissions@michener.ca

Student Name:

Last Name, First Name.

Date:

Select today's date.

Thank you for your application to the Foundations of Psychedelic Psychotherapy course at Michener Institute of Education at UHN. As the next step in the Admissions process, all applicants must submit this Supplementary Application Form by **Nov. 1, 2024**. **Failure to submit this form will result in your application being withdrawn for 2024.**

INSTRUCTIONS

Please provide your responses to the following questions and upload your completed form to [Michener Self-Service](#). **Use the Document Upload page under the Admissions menu.**

Part A: Demographic Information

1. Which racial/ethnic group or category best describes you?

2. Do you self-identify as an Indigenous person of North America?

3. With which gender do you most identify?

4. With which sexual orientation(s) do you identify? (select all that apply)

- | | | | |
|--------------------------------|-------------------------------------|---|---|
| <input type="checkbox"/> Gay | <input type="checkbox"/> Lesbian | <input type="checkbox"/> Straight/heterosexual | <input type="checkbox"/> Bisexual |
| <input type="checkbox"/> Queer | <input type="checkbox"/> Two-spirit | <input type="checkbox"/> Another identity or term | <input type="checkbox"/> I choose not to answer |

5. Do you self-identify as a person with a disability?

6. Are you an active member or veteran of the military?

Part B: Essay

1. What draws you to the field of psychedelic psychotherapy and why do you want to practice it?

2. What are your career goals and how does psychedelic psychotherapy fit in to your career trajectory?

3. Please describe your training in psychotherapy (including certifications, modalities where you are competent or have some proficiency, etc.) Please include any training in the area of psychedelic psychotherapy.

4. Please describe your current psychotherapy practice (setting, hours per week, modalities used, types of clients).

5. Please share the strengths and skills you possess that would make you an effective psychedelic therapist.

6. What aspects of psychedelic therapy do you foresee being challenging for you?

7. Do you serve any marginalized communities? Please describe.

8. Is there anything else you would like us to know in reviewing your application?

9. Bursaries

A limited number of bursaries are available for students in financial need. These bursaries are designed for students for whom the total tuition cost may be prohibitive for their participation in the program. We also acknowledge income disparities among our diverse group of applicants and aim to make access to this program more equitable. The bursaries are \$1500 each and will be granted as a reduction in the total tuition paid. If you are in financial need provide a paragraph (approx. 250 words or less) describing your financial situation and how the bursary will support your participation in this program. The paragraph should be sent to: emily.macgregor@uhn.ca on or before **Nov. 1st, 2024**. Course directors and faculty **WILL NOT** review this information to protect your privacy. A separate committee from within the UHN Psychedelic Psychotherapy Research Group not affiliated with this education program will review these applications. You will receive notification if you received the bursary along with your offer of admission.