



Scholarship Application

Academic Year 2020-2021

Application Deadline: Thursday, April 30, 2020
Scholarship Awards will be announced on or by Tuesday, June 30, 2020

Name:
First Middle Last

Address:
Street

City State Zip Code

Primary phone number:

Secondary phone number:

E-Mail:

I am requesting a tuition scholarship in the amount of: \$

Please detail your reasons for seeking financial support:

I am requesting a scholarship for:

- Adult Analytic Training
- Child Analytic Training
- Combined Child/Adult Training
- ATP
- Fellowship
- Fellowship Child Track

I am currently a member of:

- Harvard Child Consortium PiP
- Longwood PiP
- MGH PiP
- None of these

I wish to apply solely for the \$825 PiP Grant.
Page 1: Complete all fields.
*Page 3: Sign and date form (financial information and tax return **not** required).*

I wish to apply for a BPSI Scholarship **in addition to** the PiP Grant. *Page 2: Please complete all fields and attach the applicant's most recent tax return.*

Financial Information: (not required for \$825 PiP Grant)

Please provide the information requested below:

Assets & Earnings:	Cash	\$	
	Marketable Securities	\$	
	House	\$	
	Savings	\$	
	Current Annual Earnings	\$	
Liabilities & Expenses: (per month)	Home Mortgage	\$	
	School Debt/Student Loans	\$	
	Other Loans	\$	
	Current Expenses	\$	

Please detail your future financial/employment expectations:

ATP students and Candidates - If there is anything you would like the committee to know about your practice, please tell us here.

***Mandatory** - Use this space to include anything else you would like the committee to know in considering your application (such as dependents, etc.) and why you are asking for support. You may attach additional pages or a separate letter, if needed.

Please attach a copy of your most recent tax return. **If you are unable to submit a complete, current tax return - please state why and attach last year's return with a full description of any changes.*

You may scan and send electronically, in care of Drew Brydon-Cardoso at dbrydon@bps.org.

Do you have reliable sources of income other than what is listed on your tax return? **YES** **NO**

If YES, please detail:

For ALL Applicants:

With my signature I attest that I have no pending ethical complaints against me and that I am in good financial, ethical, and academic standing at my training institution / BPSI.

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Signature

Date

All application information will be highly confidential and limited to the Scholarship review team. Please mail your application by **April 30, 2020 to: Scholarship Review Committee, Boston Psychoanalytic Society and Institute, 141 Herrick Road, Newton Centre MA 02459. In care of Drew Brydon-Cardoso dbrydon@bpsj.org 617-266-0953 x105.**

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