Office: Hildegardstr. 20 ° D-10715 Berlin Fon: +49 (0)30 78 70 56 93 ° Fax: +49 (0) 30 78 70 56 93 www.step-ahead-berlin.de exa@step-ahead-berlin.de



APPLICATION FORM

1. I herewith apply for the:

🗆 Module K	Master of Arts in	Expressive Arts	Therapy (with	a Minor in Psychology)
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□ **Module P** Master of Arts in Expressive Arts Therapy (with a Minor in Psychology)

□ **Module F** Master of Arts in Expressive Arts Therapy (with a Minor in Psychology)

Please use block letters

First Name:	Surname:
Correspondenceaddress:State:	and Town:
Phone Number:	Mobile:
Email address:	
Date of Birth:	Place of Birth:
Nationality:	Profession:
Present occupati	Present position:
Employer:	

2. List of schools attended (BA, BS, University Diploma) Please include a certified copy of the highest certificate or diploma achieved.

Name and location of school:		
Attendance dates from:	until:	
Diploma, degree, certificate earned:		
Name and location of school:		
Attendance dates fron:	until:	
Diploma, degree, certificate earned:		
Name and location of school:		
Attendance datesfrom:	until:	
Diploma, degree, certificate earned:		

3. Admissions interview

□ With a representative of EGS:	Date:
□ With a Director of a cooperating University/Institute: _	Date:
□ With the Director of the Expressive Arts Institute Berli	n: Date:

4. Additional information needed

Please include (please type):

A. An updated resume that includes information about your background, your interests and your motivation to start the training in Expressive Arts (max 5 pages)

B. A short statement of intention of your personal and professional experiences and goals in the field

C. A letter of recommendation from a present or past employer

5. Application fee 75 € (Euro)

I hereby certify that the application fee of 75 ${\ensuremath{\mathbb C}}$ is payable in advance and is not refundable

Date: Signature:

The application fee of 75€ needs to be paid directly to the Expressive Arts Institute immediately after the receipt of the invoice

6. I hereby certify that the tuition is payable in advance according to the payment plan

Date:

_____ Signature:

7. I hereby certify that the information given on this application is complete and accurate. All documents must be sent to the address mentioned above.

Date: _____ Signature: