

## MICHIGAN PSYCHOANALYTIC COUNCIL

### Application for Certification in Child Analysis for Non-MPC Analysts

#### *Instructions:*

Applicants are requested to complete this application form. Please also:

1. Include a non-refundable application fee of one hundred dollars (\$100.00). Make check or money order payable to: *Michigan Psychoanalytic Council*.
2. Arrange for official transcripts of all prior analytic certification or training to be submitted.
3. Provide two letters of recommendation from professionals in your field who know you and are familiar with your work.
4. Make arrangements with the Vice President of Programs to present a paper to the MPC membership at a Sunday Scientific Meeting. With this application include two copies of the paper and the date arranged for presentation. A presentation to the membership is a required element of applying for certification.
5. Demonstrate active involvement in MPC. We certify outside analysts to the extent that they serve to enhance the organization. Your interest and commitment to MPC may be demonstrated in various ways such as through attendance at monthly meetings, participation on committees, teaching elective courses, etc. You may include a statement outlining your particular reasons for wishing to join the ranks of MPC analysts and how your talents will help move MPC forward.

Applicants must be members of MPC in order to apply.

#### *Mail a copy of the completed application to the Vice-President of Certification:*

Reena Liberman, M.S.  
1207 Packard Street  
Ann Arbor, MI 48104

#### *And a copy to the Child Psychoanalysis Committee Chair:*

Brenda Lovegrove Lepisto, Psy.D., LP, RPT-S  
4572 S. Hagadorn Rd., Suite 2D  
East Lansing, MI 48823

Or email completed application to: [rmliber@gmail.com](mailto:rmliber@gmail.com) and [drlepisto@hushmail.me](mailto:drlepisto@hushmail.me)

For further information contact the Vice-President for Certification, Reena Liberman, by phone at 734.741.1655 or email at [rmliber@gmail.com](mailto:rmliber@gmail.com).

The Michigan Psychoanalytic Council

APPLICATION FOR CERTIFICATION IN CHILD PSYCHOANALYSIS

NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

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PHONE (office) \_\_\_\_\_ (home) \_\_\_\_\_

MPC Candidate Yes \_\_\_\_\_ No \_\_\_\_\_  
(If no, please include copy of resume with this application.)

I. Personal Analysis

a. Name of Analyst and Training Institute Affiliation: \_\_\_\_\_

\_\_\_\_\_

b. Dates of Analysis From \_\_\_\_\_ To \_\_\_\_\_

c. Hours seen per week \_\_\_\_\_

d. Total number of hours \_\_\_\_\_

II. Supervision

a. Name of supervisor \_\_\_\_\_

Total hours of supervision \_\_\_\_\_

Hours patient seen per week \_\_\_\_\_ Age of patient \_\_\_\_\_

b. Name of supervisor \_\_\_\_\_

Total hours of supervision \_\_\_\_\_ Age of patient \_\_\_\_\_

Hours patient seen per week \_\_\_\_\_

c. Name of supervisor \_\_\_\_\_

Total hours of supervision \_\_\_\_\_

Age of patient \_\_\_\_\_

Hours patient seen per week \_\_\_\_\_

(continue on next page)

### III. Course Work

<i>Course</i>	<i>Credit</i>	<i>Dates of course</i>	<i>Instructor</i>
<b>BASIC CONCEPTS IN PSYCHOANALYSIS</b>			
<b>PSYCHOPATHOLOGY, SYMPTOM DEVELOPMENT AND ASSESSMENT</b>			
<b>INTRODUCTION TO CHILD PSYCHOANALYSIS</b>			
<b>FREUD'S PAPERS/CASES</b>			
Early Years			
Middle Years			
Late Years			
<b>THEORY</b>			
Attachment Theory			
Ego Psychology			
Self Psychology			
Object Relations			
<b>DEVELOPMENT</b>			
Infancy and toddlerhood			
Preschool and latency			
Preadolescent and adolescent			
<b>CHILD TECHNIQUE</b>			
Beginning Phase of Treatment			
Psychoanalytic Process			
Termination			
Working with Parents			
Psychoanalytic Relationship- Transference-Countertransference			
<b>ETHICS</b>			

<b>ASSESSMENT</b>			
Assessment and Psychopathology of Infancy and Early Childhood			
Assessment and Psychopathology of Middle Childhood and Preadolescence			
Assessment and Psychopathology of Adolescence			
<b>INTRODUCTION TO CONTEMPORARY ANALYTIC THEORY OF GENDER AND SEXUALITY</b>			
<b>CONTINUOUS CHILD CASE CONFERENCE</b>			
Continuous Child Case I			
Continuous Child Case II			
Continuous Child Case III			
<b>ELECTIVES (Give Course Titles Below)</b>			
Elective-I			
Elective-II			
Elective-III			

#### IV. Scientific Paper

A: Title \_\_\_\_\_

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B. Date Submitted to MPC Training and Certification Committee \_\_\_\_\_

C. Date scheduled to present a scientific paper (if known) \_\_\_\_\_

**ATTACH CURRICULUM VITA.**