SAFETY FIRST

Colleges and universities are required under federal law to publish and make available an annual campus security report, which includes statistics concerning campus crime. The crime statistics for all colleges and universities required to comply with this law are available from the United States Department of Education.

Adelphi University’s annual security report includes statistics for the previous three years concerning reported crimes that occurred on campus, in certain off-campus buildings or property owned or controlled by Adelphi University, and on public property within or immediately adjacent to and accessible from the campus. This report also includes institutional policies concerning campus security, such as policies concerning alcohol and drug use, crime prevention, the reporting of crimes, sexual assault, emergency response plans, training requirements for employees, and other matters. The advisory committee on campus safety will provide upon request all campus crime statistics as reported to the United States Department of Education. You may obtain a copy of this report by contacting the Department of Public Safety and Transportation, Levermore Hall Lower Level, (516) 877-3500, or by accessing this website: administration.adelphi.edu/publicsafety/
The United States Department of Education’s website for campus crime statistics is: ope.ed.gov/security

As a reminder, the rear of any Adelphi University ID card provides you with Weather Advisory and Alert numbers to obtain information on any possible delayed openings or school closings. To register for the AlertFind emergency notifications, log on to eCampus (ecampus.adelphi.edu) and click on “AlertFind.”

ACCREDITATION

Adelphi University is an independent, comprehensive institution, chartered by the University of the State of New York, and is accredited by the Middle States Association of Colleges and Schools, 3624 Market Street, Philadelphia, PA 19104-2685, (215) 684-8900, and New York State Education Department, 89 Washington Avenue, Albany, NY 12234, (518) 474-2910. It is recognized by the Commission on Collegiate Nursing Education, One Dupont Circle, NW, Suite 250, Washington, D.C. 20036-1024, (202) 659-3011, the American Speech-Language-Hearing Association, 2200 Research Blvd., Rockville, MD 20850-3289, (800) 638-8255, the National Council for Accreditation of Teacher Education (NCATE), 1201 16th Street NW, Suite 800, Washington, D.C. 20036-1213, (202) 625-7000, and AACSB International—The Association to Advance Collegiate Schools of Business, 777 South Harbor Island Blvd., Suite 750, Tampa, FL 33602-5730, (813) 727-3600.

EQUAL OPPORTUNITY

Adelphi University is committed to extending equal opportunity in employment and educational programs and activities to qualified individuals and does not discriminate on the basis of race, religion, age, color, creed, sex, marital status, sexual orientation, ethnicity, national origin, disability, genetic disposition or carrier status, veteran status, status as a disabled or Vietnam-era veteran, or any other basis protected by applicable local, state, or federal law. The discrimination coordinator for student concerns pursuant to Section 504 of the Rehabilitation Act of 1973 in Roosevelt Graduate Center, Conversion of Advising Office, Room 101, University Center, (516) 877-3145, is the discrimination coordinator for employee concerns pursuant to Section 504 of the Rehabilitation Act of 1973 and for Title IX concerns is Tone Uccitelli, Manager of Employment, Employee and Labor Relations, Room 203, Levermore Hall, (516) 877-3222. The coordinator of Title IX in the Advising Office or in the Office of the Associate Vice President for Student Life & Dean of Students, Room 203, Levermore Hall, (516) 877-3222. The coordinator for Affirmative Action in the Advising Office or in the Office of the Associate Vice President for Student Life & Dean of Students, Room 203, Levermore Hall, (516) 877-3222.
Postgraduate Certificate Admissions Information and Application Requirements

Postgraduate application materials should be sent directly to:

Adelphi University
Gordon F. Derner Institute of Advanced Psychological Studies
Office of Postgraduate Programs
158 Cambridge Avenue
Hy Weinberg Center 326
Garden City, NY 11530-0701

It is the applicant’s responsibility to ensure that all materials are sent to and received by the Postgraduate Program.

Postgraduate Application Instructions

All items must be sent directly to the Derner Institute (see address above).

1. The completed Postgraduate Application for Admission. Include your signature and the date (pages 3–5).
2. An application fee of $50. This fee is not refundable and is not credited on any subsequent bill. Checks or money orders should be made payable to Adelphi University. Adelphi alumni and veterans are not required to pay this fee.
3. Official degree-noted transcripts from all graduate colleges and universities previously attended. If you previously attended Adelphi University, the Office of University Admissions can obtain your Adelphi University transcript.

Important Numbers

Garden City Campus
General Information
1-800-ADELPHI (Out of area)
(516) 877-3050
Office of University Graduate Admissions
(516) 877-3050
graduateadmissions@adelphi.edu
Fax: (516) 877-3244
(516) 877-3244
admissions.adelphi.edu
Student Financial Services
(516) 877-3080
financialservices@adelphi.edu
Fax: (516) 877-3140
(516) 877-3140
demer.adelphi.edu
Registrar
(516) 877-3300
Alice Brown Early Learning Center
(516) 877-3906
Center for Career Development
(516) 877-3906

Gordon F. Derner Institute of Advanced Psychological Studies
(516) 877-4800
derner.adelphi.edu

- General Psychology–M.A.
  (516) 877-4802
- Mental Health Counseling–M.A.
  (516) 877-4802
- School Psychology–M.A.
  (516) 877-4743
- Clinical Psychology–Ph.D.
  (516) 877-4804
- Postgraduate Certificate Programs in Psychoanalysis and Psychotherapy
  (516) 877-4835

Off-Campus Centers
Hauppauge Center
631 500-4350
Manhattan Center
(212) 965-8340

Colleges and Schools of the University

- College of Arts and Sciences
- Gordon F. Derner Institute of Advanced Psychological Studies
- Honors College
- Ruth S. Ammon School of Education
- School of Business
- School of Nursing
- School of Social Work
- University College

Graduate Degrees

- Doctor of Arts (D.A.)
- Doctor of Audiology (Au.D.)
- Doctor of Philosophy (Ph.D.)
- Doctor of Philosophy in Social Work (Ph.D.)
- Master of Arts (M.A.)
- Master of Business Administration (M.B.A.)
- Master of Fine Arts (M.F.A.)
- Master of Science (M.S.)
- Master of Social Work (M.S.W.)
- Advanced Certificates

Adelphi University is committed to your well-being, growth, and success. A wide range of services, programs, and activities are available, including:

- Adelphi sponsors a cultural events series each semester that features lectures, art exhibits, and musical and dramatic performances.
- The Adelphi University Performing Arts Center (AU PAC) provides Adelphi with dance, theatre, and music productions in five performance venues, including the venerable 315-seat Olmsted Theatre and the 500-seat Concert Hall. The 53,000-square-foot AU PAC also houses rehearsal spaces and classrooms for the Departments of Dance, Music, and Theatre.
- Swirbul Library has a comprehensive collection of nearly 594,000 volumes, 807,000 items in microformat, 33,000 audiovisual items, and more than 30,000 electronic journal titles.
- The Alice Brown Early Learning Center provides daytime childcare services. Monday through Friday, at the Garden City campus to children ages 18 months through kindergarten, while students attend classes.
- The Center for Career Development educates students in the skills you will use for a lifetime as you select, enter, change, or advance in your career.
- The Office of Disability Support Services provides cost-free assistance to Adelphi students with documented physical, learning, or psychological disabilities to ensure equal access to the University’s programs.
- The Student Counseling Center offers a variety of services, including individual and group therapy, consultation and assessment, crisis intervention, and referrals to both on-campus and off-campus resources.
- The Center for Psychological Services offers psychotherapy and psychological testing to students, staff, and the surrounding community.
- The Health Services Center provides high quality healthcare and health education to the University community. Registered nurses are available 24 hours a day, seven days a week.
- The Office of International Student Services, which is located in the Ruth S. Harley University Center, assists international students in meeting legal requirements for entry into the United States and in maintaining legal status while pursuing full-time study at the University.
- As a private, nonsectarian university, Adelphi does not promulgate any particular religious belief. The Interfaith Center provides a campus ministry to suit your individual needs through spiritual guidance, counseling, educational programs, social events, and opportunities for worship.
- The Center for Student Involvement (CSI) supports cocurricular education as a vital component of the college experience. It serves as a resource for more than 80 clubs and organizations, and also formulates policies and procedures for planning on-campus events. The Diversity and Multicultural Programs unit, under the CSI umbrella, provides opportunities to enhance the awareness and appreciation of diversity, social justice issues, and the concerns of traditionally underserved populations.
4. Additional Comments  (Please submit a typewritten narrative)

As the writer of this narrative, you are required to give a frank assessment of the applicant. The Committee on Admissions seeks your opinion regarding the applicant’s character and personality and your judgment regarding the candidate’s ability to master advanced study in his or her chosen field. Please respond to the following where applicable:

- Length and nature of your relationship with the applicant
- Information not likely to be available from other sources
- Applicant’s unique abilities, strengths, and limitations
- Special personal qualities, capacities, and interests that distinguish this applicant from others

Name (please print)

Position

Address

Date

Do not return this form to the applicant.

Please return this form and your typewritten narrative directly to the address listed. Adelphi University is committed to extending equal educational opportunity to all who qualify academically.

Please return directly to:
Adelphi University
Gordon F. Derner Institute of Advanced Psychological Studies
Office of Postgraduate Programs
158 Cambridge Avenue
Hy Weinberg Center 326
Garden City, NY 11530-0701

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<table>
<thead>
<tr>
<th>Personal Data</th>
<th>(Please type or print clearly.)</th>
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<tbody>
<tr>
<td>Mr. Mrs. Miss Mr. (Last) (First) (Middle)</td>
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<tr>
<td>Male</td>
<td>Female</td>
</tr>
<tr>
<td>Date of Birth</td>
<td>(Mo) (Day) (Yr)</td>
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</table>

Other name(s) that have been used on transcripts ____________________________ Apt., if applicable _________________

Street Address ____________________________ City/Town__________________________ State ____________ ZIP ____________

Home Phone ____________________________ Work Phone ____________________________ Email ____________________________

Were you born in the United States?  ☐ Yes  ☐ No  If no, what is your country of birth? ____________________________

What is your country of citizenship? ____________________________

Are you a citizen of the United States?  ☐ Yes  ☐ No  If no, are you a permanent resident of the United States?  ☐ Yes  ☐ No

If you are a permanent resident, please indicate your Resident Alien Number ____________________________

If you are a permanent resident, you must enclose a photocopy of your Alien Registration Form with this application.

How long have you lived in the United States? ____________________________

Have you ever been convicted of, or pled guilty or no contest to a felony or misdemeanor charge? (An affirmative response will not automatically prevent admission, but any omission or falsification is grounds for denial or rescission of admission, or expulsion.)  ☐ Yes  ☐ No  If yes, provide an explanation. ____________________________

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<table>
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<tr>
<th>Classification</th>
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<tbody>
<tr>
<td>Semester applied for  ☐ Fall 20</td>
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</tbody>
</table>

Have you previously applied to Adelphi?  ☐ Yes  ☐ No

If yes, please specify whether for undergraduate, graduate, or postgraduate study. ____________________________
Part A. To Be Completed By Applicant

Letter must be written by academic or professional references. Letter from family/friends will not be accepted.

Name ___________________________ Other name(s) used on transcripts ___________________________

Address ___________________________ Street ___________________________ City ___________________________

State ___________________________ Zip ___________________________

Social Security Number *:

*Your Social Security Number will be used by the Derner Institute’s Office of Postgraduate Programs for identification purposes only. The Social Security Number is used to ensure the proper identification of transcripts and other application materials that may arrive under a married or changed name.

Telephone Number ___________________________

Please indicate the program of study you are applying for:

❑ Child, Adolescent, and Family Psychotherapy
❑ Couples Therapy
❑ Group Psychotherapy
❑ Psychodynamic Psychotherapy—One Year
❑ Psychodynamic Psychotherapy—Two Year
❑ Psychodynamic School Psychology—One Year
❑ Psychodynamic School Psychology—Two Year
❑ Psychoanalytic Psychotherapy—Four Year
❑ Psychoanalytic Supervision

I HEREBY WAIVE MY RIGHT OF ACCESS TO INFORMATION RECORDED ON THIS FORM AND ANY SUPPLEMENTARY SHEETS ATTACHED TO IT.

Signature ___________________________ Date ___________________________

Part B. Narrative—To Be Completed By Recommender (Attach a typewritten narrative to this form.)

_________________________ who is being considered as a candidate in one of our postgraduate programs in psychoanalysis and psychotherapy, has named you as a person who has had some contact with him or her in either a professional or educational capacity. We would appreciate your candid appraisal of the candidate’s qualifications. This information will be confidential.

1. How well do you know the applicant’s education and training?
Not at All Slightly Well Thoroughly

2. How familiar are you with the applicant’s personal qualifications?
Not at All Slightly Well Thoroughly

3. Please rate the applicant in the following areas as compared to others with similar training and experience.

<table>
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<tr>
<th>Area</th>
<th>Below Average</th>
<th>Average Ability</th>
<th>Above Average</th>
<th>Superior Ability</th>
<th>Outstanding</th>
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<tbody>
<tr>
<td>Intellectual Ability</td>
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<td>Present Ability as a Psychotherapist</td>
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<td>Potential as a Psychotherapist</td>
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<td>Potential as a Research Person</td>
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<td>Personality Adjustment</td>
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If you were on our Admissions Committee, would you accept this individual for postgraduate training?
Yes ________ No ________

Ethnic Origin:

Do you consider yourself Hispanic, Latino, or of Spanish origin?
❑ Yes ❑ No

If you wish to identify yourself with a particular racial group, please check all that apply:
❑ American Indian or Alaskan Native ❑ Asian ❑ Black or African American ❑ Native Hawaiian or Other Pacific Islander ❑ White

Race and Ethnicity

Colleges and universities are asked by many, including the federal government, accrediting associations, college guides, newspapers, and our own college/university communities, to describe the racial/ethnic backgrounds of our students and employees. In order to respond to these requests, we ask you to answer the following questions. Responses to the questions in this section are voluntary, and the information will be kept confidential. Refusal to provide this information will not subject the applicants to any adverse treatment. The following items are optional. No information that you provide will be used in a discriminatory manner.

Personal Treatment

If you have had or are currently in psychotherapy, complete the following information. Your therapist will NOT be contacted for information about you. (Not necessary for the Psychodynamic School Psychology program)

Name of therapist ___________________________ Address ___________________________

Date began ________ Date terminated ________ Frequency per week ________ Total number of sessions ________

Orientation of therapist ___________________________

Certification

Please list any license/certification that you hold. Include a photocopy of your license/certification.

Licensed/Certified as ___________________________ License/Certification ___________________________

Previous Education

Please list all institutions previously attended. Indicate your previous (and current) education. List your most recent education first by providing the name and location of the institution. Please include dates of attendance for all schools listed. Indicate the major field studied during this time, the degree earned (if any), the date the degree was or will be conferred, and whether the degree was obtained at the undergraduate (U), graduate (G), or postgraduate (PG) level.

You will be responsible for having an official transcript from each graduate college or university attended sent directly to the Office of Postgraduate Programs of the Derner Institute, even if you have taken only one course there.

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<tr>
<th>Name of Institution</th>
<th>City and State</th>
<th>Dates Attended (Month/Year)</th>
<th>Credits Earned</th>
<th>Major Field</th>
<th>Degree Date of Degree (Month/Year)</th>
<th>U/G/PG</th>
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Adjustment

Have you ever been suspended, dismissed, expelled, or required to withdraw from any high school or college for academic or disciplinary reasons? (An affirmative response will not automatically prevent admission, but any omission or falsification is grounds for denial or rescission of admission, or expulsion.)
❑ Yes ❑ No

If yes, provide an explanation ___________________________

Program of Study

Please indicate the program to which you are applying by checking the appropriate box. All programs are held in Garden City unless otherwise noted.

Postgraduate Advanced Certificate Programs

❑ DCA Child, Adolescent, and Family Psychotherapy
❑ DCM Couple Therapy
❑ DCS Group Psychotherapy
❑ DPS Psychoanalytic Psychotherapy—One Year
❑ DST Psychoanalytic Supervision

Postgraduate Programs of the Derner Institute, even if you have taken only one course there.

DST  Psychoanalytic Supervision

DPP  Psychoanalytic and Psychotherapy—Four Year

DCC  Psychodynamic School Psychology—One Year

DCY  Group Psychotherapy

DSS  Psychodynamic School Psychology—Two Year

DCC  Psychodynamic School Psychology—One Year

DPP  Psychoanalytic Psychotherapy—One Year

DST  Psychoanalytic Supervision

DPP  Psychoanalytic and Psychotherapy—Four Year

DSS  Psychodynamic School Psychology—Two Year

DSS  Psychodynamic School Psychology—Two Year

DST  Psychoanalytic Supervision

Refer to the institution’s catalog for additional program information.
4. Additional Comments (Please submit a typewritten narrative)

As the writer of this narrative, you are required to give a frank assessment of the applicant. The Committee on Admissions seeks your opinion regarding the applicant’s character and personality and your judgment regarding the candidate’s ability to master advanced study in his or her chosen field. Please respond to the following where applicable:

- Length and nature of your relationship with the applicant
- Information not likely to be available from other sources
- Applicant’s unique abilities, strengths, and limitations
- Special personal qualities, capacities, and interests that distinguish this applicant from others

Name (please print)

Position

Address

Date

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Garden City, NY 11530-0701
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Name _______________________________ Other name(s) used on transcripts _______________________________

Address ___________________________________________ Street __________ City ______ State ______ ZIP ______

Social Security Number* __________

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☐ Psychodynamic School Psychology—Two Year
☐ Psychoanalytic Supervision

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Signature _______________________________ Date ________________

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(Attach a typewritten narrative to this form.)

If you were on our Admissions Committee, would you accept this individual for postgraduate training?

Yes ______ No ______

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