



THE CHICAGO INSTITUTE FOR PSYCHOANALYSIS

EDUCATION | TREATMENT | SERVICE

FUNDAMENTALS OF PSYCHOANALYTIC THOUGHT

THE CHICAGO INSTITUTE FOR PSYCHOANALYSIS
122 South Michigan Avenue
Chicago, Illinois 60603
(312)922-7474

REQUEST FOR LETTER OF REFERENCE

The Chicago Institute for Psychoanalysis has been given your name as a reference for this applicant to its Adult Psychoanalytic Psychotherapy Program. We would appreciate it if your letter of reference could cover the following points:

1. Your position when you knew the applicant
2. The nature of your relationship with the applicant
3. A comment on the quality of the applicant's participation in classes, conferences, etc.
4. A comment on the quality of the applicant's clinical work, if applicable
5. Your impression of this applicant's capacity to participate successfully in the Fundamentals of Psychoanalytic Thought Program

Thank you very much for providing this information.

Please mail or email your letter to:

Alison Chandler
Director of Education Administration
The Chicago Institute for Psychoanalysis
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achandler@chicagoanalysis.org